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ABSTRACT

This report contains an executive summary and is based on a survey of 278 American cities with populations over 50,000, concerns problems facing families and children. The survey focused on pressing needs of children and families as seen by city officials, the prominence of these needs in community life, the involvement of city governments in meeting these needs, and barriers to expanded involvement. Key findings include: (1) Child care overshadows all other needs for city children; (2) Substance abuse prevention and education rank second and third; (3) Housing tops the list of needs for many city families; (4) Child and family issues are at least moderatley visible in the public forums of many communities, and are likely to be more prominent in elections, news, and civic agendas in large cities; (5) Diverse organizations and individuals bring these issues to city halls' attention; (6) City halls are involved in a variety of areas relevant to children; (7) City hall programs work; (8) City halls are most involved in the area of recreational activities; (9) Cities carry out their involvement through a variety of means; (10) Involvement may increase in each of 34 identified areas; and (11) Lack of money is the greatest impediment to increased city involvement in family and children's issues, and overshadows all other problems in the nation's largest cities. (RJC)

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A Survey of City Halls Regarding Children and Families

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Our Future And Our Only Hope

A Survey of City Halls Regarding Children and Families

By

Catherine E. Born
University of Maryland School of Social Work

September 1989

A Research Report of the National League of Cities

This study was conducted by NLC's Project on Children and Families in Cities, supported by grants from Carnegie Corporation of New York, the Lilly Endowment, and the Rockefeller Foundation.

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Preface

> We must redirect our focus and think of ways to help our young people in the areas of education, child care, and health.... They are our future and our only hope.
>
> – Sidney Barthelemy
> Mayor, New Orleans, Louisiana

We are pleased to present *Our Future and Our Only Hope* to NLC's member cities and towns and state municipal leagues and to others concerned with America's children. This is a timely report on topics of crucial importance to the nation's cities and to the nation as a whole:

- the most pressing needs of children and families as seen by city officials;
- the prominence of these issues in various aspects of community life;
- current and anticipated involvement of city governments in areas of identified need; and,
- barriers to cities' expanded involvement in these areas.

The report is based on a survey of nearly 400 cities undertaken by NLC's Project on Children and Families in Cities between November 1988 and February 1989, under the leadership of John E. Kyle and William R. Barnes. The project, with support from the Lilly Endowment, Rockefeller Foundation and Carnegie Corporation of New York, is an ongoing effort to encourage and assist local elected officials in meeting the needs of children and families. This survey, done to map city hall interests, involvement, and needs in areas affecting urban families, is one component of the overall project.

We agree with survey respondents that too many children and families are in need; they require immediate, collective attention. The assertion by Mayor Barthelemy of New

Orleans that children are "our future and our only hope" is no exaggeration. And it is no overstatement to point out, as does Mayor Bob Bolen of Fort Worth, Texas, that "the pylons on which strong communities are built are families." The challenge, then, as expressed by Mayor Terry Goddard of Phoenix, Arizona, is basic: "It is time for government at all levels to work together, to protect and nurture our most precious resource, our children and youth."

We hope that publication of this report will add to the growing sense of urgency about issues affecting children and families and, more important, that it will stimulate, encourage, and assist those who are prepared to take action in their own communities and at the state and federal levels.

Alan Beals
Executive Director
National League of Cities

William E. Davis,III
Director
Office of Policy Analysis and Development
National League of Cities

Author's Acknowledgements

Thanks and appreciation are due to dozens of persons whose involvement with and commitment to America's cities and her children is, ultimately, responsible for the existence of this report. Without support from the Lilly Endowment, Rockefeller Foundation, and Carnegie Corporation of New York, of course, there would be no Children and Families in Cities Project, of which this report is one product.

Appreciation is expressed, too, to the Project Director, John E. Kyle, who spearheaded the survey effort, shepherded it to a successful conclusion, and shaped the contours of the final report. Dr. William R. Barnes, Director of Research for the National League of Cities, provided invaluable substantive and editorial assistance as did the expert participants in a day-long roundtable discussion.

The greatest debt, however, is owed to the 390 mayors and other municipal officials who took time from their demanding schedules to respond to the survey.

While credit is thus correctly shared, blame is not. Errors of omission, commission, style, or interpretation are mine alone.

Catherine E. Born

Executive Summary

Our Future and Our Only Hope

By

Catherine E. Born
University of Maryland School of Social Work

September 1989

In the cities and towns of the richest country on earth, children and families face seri problems. The size of the city doesn't matter: the same set of problems threat children and families.

That is the unavoidable conclusion of this National League of Cities survey of 278 America's larger cities about the problems facing families and children. Child care a substance abuse (too much of the latter, not enough of the former) are the first a second ranked problems facing children in cities of every size. Schooling is the th ranked problem. For families, a shortage of affordable housing is the first ranl problem. Low-income housing, in particular, is a universal problem—in the East the West, in the Midwest and in the South—in cities small and large.

From coast to coast, cities are working on these issues in diverse and innovative wa They predict that their involvement will increase over time—except that there is money to support expansion. In city after city, region after region, lack of funds is cal the single greatest barrier to increased city involvement in family and children's issu

It's true: the size of the city doesn't matter, the problems are the same.

Findings

The central topics of the survey were the most pressing needs of children and families as seen by city officials, the prominence of these issues in various aspects of community life, the current and anticipated involvement of city governments in these areas, and the barriers to their expanded involvement. The key findings for each theme are presented below.

The Most Pressing Needs of Children

1. By an overwhelming two-to-one margin, child care overshadows all other needs for city children. In 91 percent* of the cities responding, it tops the list for children of all ages, and it tops the list for three of the five age groups: 0 to 2 years in 63 percent of the cities, 2 to 5 years in 80 percent, and 5 to 9 years in 69 percent.

2. Substance abuse prevention and education rank second (42 percent of the cities) and third (33 percent), respectively, on the overall list of children's needs.

3. In cities of every size and in every region of the country, these same topics are among the five most pressing needs.

The Most Pressing Needs of Families

1. Housing, in at least 70 percent of the cities, tops the list of needs for city families when all types of families are combined. It is a particularly acute problem for low-income families.

   - The housing crisis is nationwide. It is the number one need in all regions of the country and in cities of every size.
   - The housing problem is not confined to poor families; it is among the top five needs for all city families except those of high income.

2. Income and household composition differences notwithstanding, officials in every region and in cities of all sizes believe urban families share common needs: child care, family support, substance abuse prevention, housing, and education.

---

* Percent of cities citing this as a need for at least one of five different age groups. Percentages can total more than 100 because cities could identify the same need in more than one age group.

The Prominence of Child and Family Issues

1. In at least 70 percent of the cities, child and family issues are at least moderately visible in communities' election-focused reporting, candidates' speeches and materials, day-to-day news coverage and on the agendas of local civic groups.

2. The larger the city, the more likely these issues are to be prominent or very prominent in elections, the news, and civic agendas.

3. Diverse organizations and individuals participate in bringing child and family issues to the forefront of city hall attention. But insiders, such as city hall professional staff and elected city officials, are the key players in this regard.

City Hall Involvement in Children's Issues

1. City halls are involved in a diverse array of areas relevant to children. Major or modest involvement is reported by at least 40 percent of the cities for twenty-five of the thirty-four survey topics. For only three topics is such involvement reported by less than 25 percent of the cities.

2. City hall programs work. Eighty percent of the cities report at least one "success story" concerning children and family topics.

3. Recreation-related activities (parks and playgrounds, recreation activities, and community centers) are the issues in which the greatest city hall involvement is reported.

4. Recreation as an area of major city hall involvement is the norm, not the exception, in all regions and in cities of every size.

5. Cities carry out their involvement through a variety of means. Contracting with public and private entities is almost as common as direct provision of service.

    - Direct service provision is the dominant mechanism in smaller cities (50,000 to 100,000), while contracting with non-governmental organizations is more common in the very largest cities (more than 300,000).

6. Respondents think it likely that, in 1989-90, their involvement will increase in each of thirty-four identified areas. However, the areas of greatest involvement now (recreation) are predicted to also be areas of greatest involvement in the near future.

7. According to city officials, the single greatest impediment to their increased involvement in family and children's issues is a lack of money: 50 percent of the cities ranked lack of money as the number one impediment; another 25 percent ranked it in the top five.

8. Lack of money is a major problem in cities of all sizes, but in the nation's largest cities, it far overshadows all other problems: 70 percent of the largest cities ranked it as the greatest impediment.

Methodology

In winter 1988-89, 390 cities with populations of 10,000 or more responded to an NLC survey about the needs of city children and families, city hall involvement in efforts to address those needs, and barriers to their greater involvement. The study is part of NLC's Children and Families in Cities project. Supported by the Lilly Endowment, Rockefeller Foundation, and Carnegie Corporation of New York, the Project is a multi-faceted effort to encourage, assist, and enable local elected officials in meeting the needs of children and families.

Small, as well as large, cities took part in the survey, but the body of this report is based only on the 278 forms received from cities with more than 50,000 residents. The number returned by cities with populations between 10,000 and 50,000 persons does not permit us to generalize to the universe of such communities. For descriptive purposes, however, results for these smaller cities are presented in Appendix C.

1. Introduction

By
John E. Kyle, Project Director
Children and Families in Cities
National League of Cities

This report provides detailed findings and analysis from the National League of Cities' first survey of city hall interests, involvement, and needs concerning issues affecting children and families, especially those who live in poverty or who are otherwise at risk. The survey results reveal great awareness and sensitivity concerning child and family issues on the part of municipal officials and a pattern of involvement in multiple areas of concern.

The report serves several useful purposes:

- It stands as a timely and authoritative examination of the most pressing needs of children and families in cities; the level, methods, and varieties of city government involvement in such needs; and the barriers to expanded involvement.
- Its information and data encourages NLC's development of active assistance tailored to the needs of city hall officials.
- It establishes a rich data base for additional scrutiny and analysis and a baseline for future studies.

Responses from 390 cities make the report representative of cities and towns of various sizes from across the country. The variety of responses allows the presentation of a variety of municipal experiences. This breadth of response establishes this as a landmark study in terms of children and families in cities. A survey taken in 1988 by

the U.S. Conference of Mayors reported on a more modest total of 52 cities. The International City Management Association's 1983 survey of city managers focused on a broader array of human services.

Why do a study concerning children and families?

Today's children and families have tremendous opportunities and making the most of them is a universal goal. However, today's children and families face tremendous problems, including:

- Drugs: U.S. high school and college students and young adults use illicit drugs to a greater extent than young people in any other industrialized nation in the world.
- Poverty: One in five children lives in poverty; 16 percent of all families with children were officially poor in 1987.
- Lack of housing and homelessness: Housing costs have accelerated three times faster than incomes.
- Lack of child care: Seventy-five percent of this country's mothers and 57 percent of the fathers find it difficult to locate child care, with an even wider gap predicted by 1990.

Investments of time, thought, leadership, and resources now will help prevent problems for children, families, and communities tomorrow.

Why are cities important in regard to children and families?

The more than 19,000 government units in the United States classified by the U.S. Census Bureau as municipalities are home to more than 60 percent of the U.S. population. These municipalities may be formally known as cities, towns, or villages, but they share an important common function—the delivery of services to their residents.

Cities are home to a growing share of the nation's poor and at-risk populations. Central cities and metropolitan communities in all four major regions of the country are particularly affected because their share of the poverty population has increased since 1979, according to Mark Hughes in NLC's recent report, *Poverty in Cities* (1989).

Nor are middle-income and affluent families without problems. Lack of child care and affordable housing and experimentation with drugs, alcohol, and sex are not limited to economically disadvantaged families.

Here is how one woman describes the stresses and strains on the American family:

> Let me elaborate on the normal American family. I am a working mother with three children...and a new husband who has three children of his own. The sad part of our life is no matter how hard we try we'll never own a home and never afford things that are important like medical insurance, dental visits, etc. I fear our children will lose the flair for achievement because there are no goals to reach in our family; if we try to save [to buy a home] something always comes up and our savings dwindle, if we can save any at all. – quoted in *Tell the President: Your Family Matters*, by Andrea Camp and Amy Moore, the Child Care Action Campaign, June 1989.

Meeting the needs of children and families is an important part of making municipalities livable. Today's children and families represent the future – the future for the nation and the future for every city.

Why are the views of these city officials important?

The officials who responded to NLC's survey (see Appendix A for details about titles) know what needs to be done in their cities for children and families – and what is being done. They are not overly self-interested; that is, they are not devoted solely to service delivery, study, or advocacy on behalf of children and families but more broadly to responsive local government. City hall officials are accustomed to confronting a mixed, complex, and overall agenda for the city and city residents. For that reason, city hall officials will be fresh faces and voices to add to the more narrowly focused child and family professionals and advocates.

Furthermore, they sit in positions where they can, and do, act, so knowledge of their interests, views, and needs is important to NLC and others. Although important planning, policy, and funding decisions might be made many miles away in the state or national capital, it is nevertheless the responsibility and right of local officials and residents to ensure that the needs and interests of their families and children are met – in the cities and towns where the people are and where the services are delivered.

How are the needs of children and families characterized?

The questionnaire provided a list of thirty-four topics (listed in Table 1-1, next page) to prompt responses. Respondents, however, were also encouraged to write in "other" topics.

It is clear that, in the long run, these specific topics must be placed in context with the more general or traditional topics (such as police, housing regulations, sanitation, recreation, and zoning) that cities address regularly and that also affect city children

Table 1-1
Survey Topics

CHILD CARE
- Family day care
- Infant/toddler child care
- Preschool child care
- School age child care

HEALTH
- Pediatric and adolescent AIDS
- Prenatal and well baby care
- Adolescent health clinics
- Nutrition

ADOLESCENT PREGNANCY
- Teen pregnancy prevention

HOUSING
- Low income housing
- Emergency shelters
- Homelessness

FAMILY VIOLENCE
- Child abuse
- Spousal abuse

JUVENILE JUSTICE
- Delinquency prevention
- Gangs
- Runaways/status offenders

RECREATION
- Community centers
- Parks & playgrounds
- Recreation activities

YOUTH EMPLOYMENT
- Job training/placement
- Youth conservation corps
- Summer job programs

ALCOHOL AND DRUGS
- Adolescent treatment
- Substance abuse prevention

CHILD WELFARE
- Adoption
- Foster care
- Neglect

FAMILY SUPPORT
- Counseling/information
- Education for parenthood
- Adult job training/placement

EDUCATION
- Early childhood education
- Dropout prevention
- School counselors

and families. The survey results clearly demonstrate how "traditional" city functions and policies (as in recreation) are, or are becoming, "child and family" functions.

The survey probed both "children" and "families" with the intention of remaining committed to both and to each. To look only at families risks overlooking the needs of children. To look only at children risks overlooking the needs of parents or of the family as a unit. Consider a pregnant teen, for example. The integrated approach could look at the service needs of the parenting teen (both mother and father), the teen's parents, and the teen's child, individually as well as collectively. It could also look at the "child and family" issues in terms of "city" issues such as health care, local transportation to services, schooling and school curriculum, transition to work, and city economic development.

What is here?

There are four main chapters that report on what 278 larger cities told us about:

- the most pressing needs of children,
- the most pressing needs of families,
- the prominence of such issues, and
- the level, methods, and varieties of city hall involvement and barriers to expanded involvement.

Tables throughout these chapters emphasize, clarify, and augment the text.

In addition, Appendix B provides some tables that supplement the main report.

Appendix A details research methodology.

Appendix C presents survey findings and analysis on the 112 small city responses and lists the responding small cities.

Appendix D lists the responding larger cities.

Appendix E provides brief "success stories" from the survey respondents. They are grouped by the survey's major topics.

How the Survey Was Done

During the summer and fall of 1988, the staff of NLC's Project on Children and Families in Cities designed and implemented a study to survey city hall interests, involvement and needs concerning issues affecting children and families. In November 1988, a questionnaire was sent to 790 mayors of American cities and towns by the project staff.

Table 1-2
Survey Responses by Region and Size

Region	Size Group	Surveys Sent	Surveys Received
Midwest	10,000 to 50,000	92	35
	50,000 to 100,000	71	43
	100,000 to 300,000	28	19
	over 300,000	12	11
	Totals	203	108
Northeast	10,000 to 50,000	96	31
	50,000 to 100,000	85	37
	100,000 to 300,000	21	11
	over 300,000	7	7
	Totals	209	86
South	10,000 to 50,000	84	29
	50,000 to 100,000	53	24
	100,000 to 300,000	45	27
	over 300,000	19	15
	Totals	201	95
West	10,000 to 50,000	53	17
	50,000 to 100,000	76	49
	100,000 to 300,000	35	24
	over 300,000	13	11
	Totals	177	101
Grand Totals		790	390

During the winter, a total of 278 larger cities (populations greater than 50,000) and 112 small cities (populations from 10,000 to 50,000) responded in time to be included in the tabulations reported in the main report or the appendices. Table 1-2 shows the response by region and size.

The project staff collected, tabulated, and coded the responses. Data entry and data runs were conducted by ReData, Inc. Preliminary results were prepared and published by the project staff for release at the NLC Congressional-City Conference in March 1989 and were subsequently featured in *USA Today*.

In April 1989, Catherine Born of the University of Maryland School of Social Work was selected to write a detailed analysis of the survey responses. Her expertise in research and advocacy and her considerable good humor have made her an excellent choice.

Several other people helped make this study and this publication possible. Besides editing and assembling the success stories in Appendix B, Lawrencetta Thomas took care of what must have seemed like an endless series of administrative tasks. Three interns, Katherine Hughes, Cynthia Stachelberg, and Troy Stout also worked hard to

keep this effort running smoothly. Through their time, effort, and comments, the experts who participated in two roundtable discussions of the project helped keep the study and the report headed in the right direction. Three individuals—John Merrow, Lawrence Schweinhart, and Robert Agranoff—critiqued the report, and two colleagues, William R. Barnes and Douglas D. Peterson, provided comments and advice. Clint Page edited and produced the report. To all of these people, I offer thanks for a job well done.

A Closing Comment

One city official responding to the survey asked NLC to "help us by providing information on what other cities have been doing to combat some of the social ills of the community related to families and children as well as how the mechanisms were coordinated with non-city entities. Also, what should be the extent of city hall involvement in the direct provision of social programs."

This report begins to answer the need for information on what cities are doing and how they are doing it. It provides benchmarks for local leaders and local residents as they decide what to do in their cities.

2. The Most Pressing Needs of Children

> Our greatest natural resource is the potential for creativity that lives in every child. Children are born with hope in their hearts and dreams in their minds. It is our responsibility to nurture these hopes.[1]

Although some needs – like food, shelter, clothing, health care – are universal, it is perhaps misleading to speak of the needs of more than 60,000,000 children because this diverse population includes infants as well as teens who are already parents themselves. It includes, too, children too young for formal education and young adults of high school or college age, those in need of well-baby care themselves and those who need it for their own infants.

The survey asked officials to identify the most pressing need for each of five age groups of children (0-2 years, 2-5 years, 5-9 years, 9-14 years, and 14-18 years). From a list of thirty-four topics, they were asked to select one as most pressing for each of the five age groups. Table 2-1 summarizes the responses and indicates the top-ranked children's needs.

Child care tops the list as the most pressing need for children in the cities and towns surveyed. About nine of ten questionnaires mention child care as the most pressing need in response in at least one of the five age groups. Many give this response for more than one age group.

The ranking of needs indicates that city hall officials are aware both of the diversity of their child populations and their commonalities. The list of overall priorities includes needs relevant to all children (such as education) as well as problems tied more specifically to youngsters of certain ages (such as pregnancy prevention). Table 2-2 shows the priorities identified for children in the five different age groups.

Table 2-1
The Most Pressing Needs of City Children 0-18 Years

Need	Percent of all cities*
Child care	91
Alcohol & drugs	42
Education	33
Health	31
Pregnancy prevention	29

* Officials were asked to name the most pressing need for each of five age groups of children. Thus, five separate need responses were given by each respondent. Numbers in the table represent the percent of cities that gave the listed response for at least one of the five age groups. Percents total more than 100 because many cities identified child care, for example, as the most pressing need for more than one of the five age groups.

Table 2-2
Ranking of Needs of City Children by Age Group
(Percent of Cities Ranking Need As Top Need for Age Group)

0-2 years		2-5 years		5-9 years		9-14 years		14-18 years	
Need	%	Need	%	Need	%	Need	%	Need	%
Child care	68	Child care	80	Child care	69	Alcohol/drugs	30	Alcohol/drugs	25
Health	28	Education	9	Education	10	Recreation	16	Teen pregnancy	22
Family Violence	2	Family violence	4	Recreation	4	Education	13	Education	19
Family Support	2	Health	4	Alcohol/drugs	4	Juvenile Justice	12	Employment	14
Child welfare	1	Child welfare	2	Child welfare	4	Child care	11	Juvenile Justice	9
				Family violence	4				

What do these data reveal about the needs of city children?

1. Child care tops officials' list of the most pressing needs for all children of all ages taken together and their lists for three of the five age groups (zero to two years, two to five years, five to nine years).

Today, working mothers are the norm, not the exception, in families of all types and all incomes. By 1990, an estimated 64 percent of all families, containing 10.4 million children under six, will have working mothers.[2] The majority of today's working mothers—71 percent of those with children under eighteen and 66 percent of those whose children are under three—work full-time.[3]

The gap between child care demand and supply has been repeatedly documented. According to one study, 75 percent of the country's mothers and 57 percent of the fathers found it difficult to find child care.[4] The gap will be wider by 1990, exacerbated by a growing shortage of child care workers, high staff turnover rates, and a shrinking pool of young adults in the prime care-giving age group from which to draw new employees.[5]

For the youngest age groups (zero to two years, two to five years, five to nine years), child care is the virtually unanimous choice as the most pressing need. More than two cities in three (eight in ten for the two- to five-year-old group) cite child care as the most critical need.

The city officials' perceptions reflect both the urgency of the nation's child care dilemma and its relationship to other trends and realities. Infant care, for example, is both expensive and in limited supply. Historically, many licensing regulations have forbidden care for children under two because of the special hazards involved.[6] Yet in 1987, more than one-half of mothers with children aged one year and under were in the labor force.[7]

Similarly, it is estimated that, nationwide, six to ten million youngsters are self-care or latchkey children; next to child care provided by parents, staying home alone or with a sibling is the most common arrangement for American children ages five to fourteen.[8] There is no unequivocal evidence that self-care is always damaging, but children themselves report being afraid, bored, and lonely. Research suggests, too, that the incidence of experimentation with sex and alcohol increases as more children spend more time unattended in their homes.[9]

The ripple effects from lack of child care may also be broader than generally perceived. According to the Children's Defense Fund, more than 200,000 non-working mothers of young children turn down job offers each month because they cannot find or afford child care. Similarly, in 1987, the U.S. General Accounting Office reported that about 60 percent of the persons enrolled in AFDC work and training programs said lack of child care prevented their full participation.[10]

Lack of infant, pre-school and school-age child care is a nationwide problem. Echoing sentiments expressed on many survey forms, the respondent from Riverside, California, comments that "[our] main problem is availability of child care; the majority of facilities have long waiting lists". In Daytona Beach, Florida, the child care shortage was cited as a serious concern and problem; in Tacoma, Washington, state welfare reform and increasing numbers of working mothers has created a crisis situation. From Des Plaines, Illinois, came the observation that there is great need for subsidized day care.

2. City officials generally believe that the children in their communities face a diverse array of pressing needs.

For all children, alcohol and drug abuse problems (specifically substance abuse prevention) rank second overall on the priority list while educational needs, especially those related to dropout prevention and early childhood programs, are third. Health (prenatal and well-baby care) and teen pregnancy prevention are also identified as pressing needs by about three of ten city officials.

The officials' emphasis on substance abuse prevention is consistent with society's growing recognition of drugs and alcohol as major problems in their own right and as parts of other problems as well. The particular focus on prevention is most relevant for the pre-teen and young teen population since persons who start drug use at an early age (under fifteen) tend to develop the most dysfunctional drug use patterns over time.[11] Research has similarly shown that drug-dependent persons do poorly in school and that students who use illicit drugs appear to be significantly less committed to school norms, academic achievement, and participation in athletics or activities.[12] There also appears to be a link between early drug use and delinquent behavior. A national study found that nearly 50 percent of serious juvenile offenders also used more than one illicit drug.[13]

The abuse of alcohol and drugs affects children and families in all American communities. In fact, high school and college students in the United States today use illicit drugs to a greater extent than the young people in any other industrialized nation in the world.[14] Among high school seniors, 37 percent have had five or more drinks in one sitting within the last two weeks; among college students the rate is even higher.

Education ranks third on the officials' overall list of pressing needs for their communities' youngsters. Quality education is a basic need of all children, yet as a spate of recent television documentaries indicates, an increasing number of American youths lack the basic skills to compete in today's global society. Only half of today's high school students read at levels considered adequate for performing moderately complex tasks. The Committee for Economic Development reports that an astounding 80 percent have inadequate writing skills. Among poor children, disproportionately city residents, some 75 percent are below average in basic skills.

3. The prevalence and universality of these needs is illustrated by the finding that, regardless of city size, the same topics consistently appear on the priority needs list.

Child care, substance abuse prevention, education, health, teen pregnancy prevention, and recreation are the needs most often cited in cities large and small. There are, however, some differences in the ranking of the issues, as shown in Table 2-3.

The topic of alcohol and drugs (specifically substance abuse prevention) is second only to child care in cities with populations between 50,000 and 100,000. However, it ranks fourth in cities with 100,000 to 300,000 residents and fifth in those with more than 300,000. Sharing second place in cities with populations between 100,000 and 300,000 are education (specifically dropout prevention) and health, while teen pregnancy prevention ranks second in cities over 300,000.

Table 2-3
Ranking of Needs of City Children by Size of City
(Percent of Cities in Each Size Group Citing Need at Least Once)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Child Care	91	Child care	92	Child care	91
Alcohol/drugs	48	Education	41	Teen pregnancy	43
Education	27	Health	41	Education	41
Teen pregnancy	27	Alcohol/drugs	37	Health	38
Health	24	Teen pregnancy	25	Alcohol/drugs	33
Recreation	23	Recreation	25		

4. In general, the same priority needs are identified in all four parts of the country, but there are some regional variations in the ranking of those needs.

In all four regions of the country (Northeast, Midwest, South and West), child care also tops the lists of the most pressing needs for children. Substance abuse prevention, education, health, and adolescent pregnancy prevention also appear most frequently in the top five lists. There are a few regional differences, however, as shown in the Table 2-4.

5. There are two dominant needs for children between birth and five years old: child care and health. Two needs predominate for children from five to nine years old as well: child care and education.

The survey asked officials to choose from a list of thirty-four needs and, if desired, to write in other responses. For the three youngest age groups, which include children up

Table 2-4
Regional Patterns Regarding Needs of Children 0-18
(Percent of Cities in Each Region Citing Need at Least Once)

Northeast		Midwest		South		West	
Need	**%**	**Need**	**%**	**Need**	**%**	**Need**	**%**
Child care	91	Child care	90	Child care	88	Child care	96
Alcohol/drugs	44	Alcohol/drugs	36	Alcohol/drugs	31	Alcohol/drugs	55
Health	39	Health	29	Health	42	Health	*
Education	33	Education	22	Education	53	Education	26
Teen pregnancy	33	Teen pregnancy	30	Teen pregnancy	48	Teen pregnancy	*
Recreation	*	Recreation	*	Recreation	*	Recreation	25
Juvenile Justice	*	Juvenile Justice	22	Juvenile Justice	*	Juvenile Justice	20

* Not in top five

to nine years, one or two needs account for the vast majority of responses. Child care is the dominant need and either health or education the secondary need; nothing else is mentioned by more than two percent of respondents. This is illustrated in Table 2-5.

Table 2-5
Dominant Needs of Children Aged 0 to 9 Years
(Percent of Cities by Size Group Citing Need)

	0-2 years		2-5 years		5-9 years	
All Cities						
	Child care	68	Child care	80	Child care	69
	Health	28	Health	9	Education	10
		96		89		79
50,000-100,000						
	Child care	75	Child care	82	Child care	69
	Health	21	Health	6	Health	7
		96		88		76
100,00-300,000						
	Child care	59	Child care	81	Child care	65
	Health	36	Education	9	Education	13
		95		90		78
300,000+						
	Child care	57	Child care	74	Child care	73
	Health	36	Education	17	Education	12
		93		91		85

This pattern of one or two dominant needs is also true for the various regions of the country, and, for all four regions, child care is the first ranked need for all three age groups.

7. Regardless of city size, for children aged nine years and older, the pattern of needs is more diverse, and no single need or pair of needs predominates.

In contrast to the pattern of one or two dominant needs for children under the age of nine years, city officials consistently see a broader range of needs for older youngsters in their communities. Not only is a different set of needs identified for the older group, but no single need or pair of needs dominates. For all cities, substance abuse prevention ranks first for both the nine- to fourteen- and fourteen- to eighteen-year-old age groups, but it is cited by fewer than one third of the cities in both cases. In the nine- to fourteen-year-old group, the second ranked need, recreation, is mentioned by 16 percent, while education and juvenile justice are noted by 13 percent and 12 percent of the cities, respectively. Similarly, the ranking of other critical needs for the oldest group (fourteen to eighteen years) is: teen pregnancy (22 percent), dropout prevention (16 percent), employment (14 percent), and juvenile justice (9 percent).

Examining regional data separately also shows a more dispersed pattern of needs. In all regions, however, for the nine- to fourteen-year-old group, substance abuse prevention is named as the top priority. For the oldest age group (fourteen to eighteen years), teen pregnancy prevention is the leading priority in all regions except the West, where substance abuse prevention is more frequently mentioned.

8. There are noticeable differences by city size in the ranking of needs for children aged nine to fourteen years. A major difference is the perceived relative need for pregnancy prevention efforts among this age group.

While cities large and small show remarkable unanimity of opinion that child care, health, and education are the most critical needs of their under-nine populations, there is no such consensus on the needs of pre-teens and teenagers. Table 2-6 illustrates the rather striking differences by city size in perceived needs for this group of urban children.

Table 2-6
Rank Ordering of Needs for Children Aged 9 to 14 by Size of City
(Percent of Cities in Each Size Group Citing Need)

50,000-100,000		100,000-300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Substance abuse prevention	36	Substance abuse prevention	24	Pregnancy prevention	24
Recreation	15	Recreation	21	Substance abuse prevention	14
Delinquency prevention	10	Child care	14	Dropout prevention	14
Child care	9	Dropout prevention	10	Delinquency prevention	12
Dropout prevention	7	Pregnancy prevention	10	Child care	12

In cities with populations between 50,000 and 300,000, the number one perceived need is for substance abuse prevention programs. In America's largest cities (more than 300,000), however, substance abuse prevention ranks second. Here, the overarching need is for teen pregnancy prevention programs; pregnancy prevention among nine- to fourteen-year-olds is the number one priority in roughly one of every four cities with populations greater than 300,000. While programs relating to teen pregnancy rank fourth in intermediate size cities, they are not among the top five in cities with less than 100,000 population.

Similarly, while recreation is cited as the second most pressing need for nine- to fourteen-year-olds in cities of 50,000 to 300,000 population, dropout prevention and substance abuse prevention rank second in cities with more than 300,000 residents. Recreation is not among the top five needs identified in the nation's largest cities.

There are differences by region, too, in the identification and ranking of perceived needs for nine- to fourteen-year-olds. Substance abuse prevention ranks first in all

regions (tied with education in the South). However, it is cited by nearly two out of five western cities, but only one out of five from the South. There are also noticeable differences in the remainder of the regional top five listings. In both the Northeast and West, for example, recreation and child care, in that order, rank second and third. In the Midwest, education places second. Third ranked in the Midwest is juvenile justice and in the South, teen pregnancy prevention.

9. Differences between growing up in a very large city and growing up in a smaller community are most obvious in survey data for the fourteen- to eighteen-year-old group.

Differences by city size are most observable and pronounced in the ranking of needs for children aged fourteen to eighteen years.

Table 2-7 shows that while certain of the basic needs of these young people are universal (for example, education and employment), their relative priority may vary depending on the size of the city in which the young person resides.

Table 2-7
Rank Ordering of Needs for Children Aged 14 to 18 by Size of City
(Percent of Cities in Each Size Group Citing Need)

50,000-100,000		100,000-300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Alcohol/drug prevention	31	Employment	23	Dropout prevention	29
Pregnancy prevention	25	Dropout prevention	20	Pregnancy prevention	26
Employment	12	Alcohol/drug prevention	17	Alcohol/drug prevention	19
Dropout prevention	9	Pregnancy prevention	17	Juvenile justice	10

While the top five needs for older city children are nearly identical across cities, their ranking differs markedly from small cities to large ones. Dropout prevention leads the list in the very largest cities, while substance abuse ranks first in cities of 50,000 to 100,000 population. Cities of intermediate size (100,000 to 300,000), however, cite provision of youth employment opportunities (training, placement, and summer job programs) and dropout prevention efforts, in that order, as their most critical needs.

10. The needs for fourteen- to eighteen-year-olds also vary from region to region.

Regional differences are apparent, too, for this age group. In every region but the West, teen pregnancy prevention is the most pressing need; in the West, substance abuse prevention ranks first. Substance abuse prevention is the second most pressing need in the Northeast and South. Youth employment ranks second in the West and is tied with

substance abuse prevention in the Midwest. Substance abuse prevention ranks third in all regions but the West; there, education rounds out the top three needs.

Summary

Several hundred city officials, representing the full spectrum of American cities, have identified what they believe to be the most pressing needs confronting children in their cities and communities.

Unquestionably, the most consistent and persistent need identified by city hall officials is child care – in all regions of the country and in cities large and small. By very wide margins, it is the first ranked need for all urban children regardless of age, as well as for infants and toddlers, pre-schoolers, and elementary school age youngsters.

For older children – those aged nine to eighteen years – prevention is a common theme. In all cities and all regions, programs to prevent substance abuse, teen pregnancy, and school dropouts are most frequently noted as the most critical needs of older children.

3. The Most Pressing Needs of Families

> Human revitalization issues...are as important as physical revitalization, even though they are more difficult to accomplish...nonetheless, we must try.[15]

Only 40 percent of American households today have a child eighteen or younger (50 percent did in 1960), but those families are more diverse today than they were thirty years ago. They are increasingly as likely to be headed by a never-married, divorced, separated, or remarried parent as by a husband-wife, two-parent dyad.[16] While in the 1950s more than 60 percent of American families contained one breadwinner, one homemaker, and several children, today only 17 percent of all families fit that description.[17]

Low-income families with children have different needs than do moderate or well-to-do families. Single-parent families with children (the fastest growing type of family in America) confront challenges that may not be the same as those faced by two-parent households. Families with children in large urban areas face a different reality than that confronting families in smaller cities.

Respondents were asked to identify the most pressing need in their communities for five different types of families (low-, middle-, and high-income and one- and two-parent). Table 3-1 incorporates data from responses concerning all five types.

City officials agree that housing is a pressing need for at least certain families in their communities. Seven of every ten cities name housing as the most critical need for at least one of the five groups of families.

The ranking of the needs of families represents a diverse set of needs ranging from affordable housing to the provision of counseling, information, and adult job training

Table 3-1
The Most Pressing Needs of City Families

Need	Percent of all cities*
Housing	70
Family support	61
Child care	52
Alcohol/drugs	35
Recreation	20

* Officials were asked to name the most pressing need for each of five types of families. Thus, five separate need responses were given by each respondent. Numbers in the table represent the percent of cities that gave the listed response for at least one of the five family types. Percents total more than 100 because many cities identified housing, for example, as the most pressing need for more than one of the five family types.

and placement services (family support). The list reflects officials' concern with preventive services, too, particularly in the area of substance abuse and the seemingly universal problem of providing sufficient child care services for families with children.

While housing tops the list of urban family needs, Table 3-2 reveals that other issues are seen as more pressing when the needs of different types of families are separately examined (Tables B-1, B-2, B-3, B-4, and B-5 in Appendix B rank needs for each family type by city size).

Table 3-2
Ranking of Needs of City Families By City Officials
(Percent of Cities in Each Size Group Citing Need)

Low-Income Need	%	Middle-Income Need	%	High-Income Need	%	Single-Parent Need	%	Two-Parent Need	%
Housing	67	Family support	27	Alcohol/drugs	35	Child care	39	Family support	40
Family support	18	Child care	23	Family support	28	Family support	33	Child care	27
		Alcohol/drugs	20	Recreation	16	Housing	17	Alcohol/drugs	10
		Recreation	10	Child care	8			Housing	8
		Housing	8						

What do these data tell us about the needs of different types of urban families?

1. Housing leads the list of city families' key needs with housing for low-income families the most often mentioned specific need.

By an overwhelming margin (seven out of every ten cities), housing is viewed by local officials as the top priority for families in their cities and towns. Given what has happened to housing costs in recent years, this finding likely reflects a problem of near crisis proportion in many American cities. The grim statistics are noted by Reamer (1989):

> During the past 15 years housing costs have accelerated almost three times faster than incomes. From 1981 to 1987, rents increased 16 percent more than commodity prices...and now are at their highest level in more than two decades. More than six million American households pay half or more of their income for rent...of homeowners with mortgages, two million pay half or more of their income for housing. In 1949, the average thirty-year-old could buy a home using 14 percent of his or her income. This figure has now risen to 44 percent of income.[18]

2. Housing is a common concern in American cities of all sizes; it leads the priority list not only for the largest cities (over 300,000 people) but also for those of moderate (50,000 to 100,000) and intermediate (100,000 to 300,000) size.

The preeminence of housing, particularly for low-income families, as an issue of concern to urban officials holds true when responses are analyzed by city size. The top four needs for all cities are also, in that order, the top four needs for cities with populations of 50,000 to 100,000, 100,000 to 300,000, and greater than 300,000.

The border-to-border community realities embodied in these dry statistics were expressed in narrative form on many survey forms:

> "I [must] reiterate the critical need for affordable housing for families." – Santa Barbara, California.
>
> "Housing is a problem for young and old." – Summit, New Jersey
>
> "Homelessness continues to be the fastest-growing problem." – Warwick, Rhode Island.

Warwick is not the only city in which homelessness is a problem. Nationally, families with children comprised one-third of the homeless in 1987, and in many cities this figure approaches or exceeds 50 percent. In 1987, too, the demand for shelter for families in America's major cities increased by 32 percent over 1986 levels.

3. Income and household composition differences notwithstanding, city hall officials believe that urban families generally share common unmet needs.

There are some differences by family type in the identification and ranking of needs (Table 3-2), but there are also many areas of similarity. Family support appears on all five lists in Table 3-2. Housing and child care appear on four of five, substance abuse on three of five.

4. Respondents from the four regions of the country consistently identified the same five needs as most important. Southern cities, however, seem to differ from the other three regions on several points.

Housing, family support, child care, substance abuse prevention, and recreation remain the top five needs when responses are analyzed by region of the country. The relative ranking of issues, however, varies somewhat on a regional basis. In the Northeast, Midwest and West, housing and family support services are the first and second ranked topics. In the South, the order was reversed.

5. In cities of all sizes and in all regions of the country, one problem—the need for housing—overshadows all others in the officials' perceptions of the needs of low-income urban families.

Housing is named as the most pressing need for low-income families on roughly two of every three survey forms, no matter the city size.

Housing's rank as the number one need among low-income families in cities will not surprise anyone familiar with the housing realities and shortages confronting low-income city households. In 1984, the National Housing Law Project estimated that half a million low-income housing units were being lost every year to condominium or co-op conversion, abandonment, arson, and demolition.[19] By 1985, the gap between the number of low-income (8 million) renters and the number of affordable units (4.2 million) was estimated to be 120 percent greater than it was in 1980.[20] Compounding the problem are such facts as a massive decline in federal funds for low-income housing programs during the 1980s, fewer and fewer middle-income families who can afford to purchase homes and who thus swell the ranks of renters in the market, and the expiration of Section 8 certificate agreements entered into in the 1970s.

Housing, of course, is not the only acknowledged need of poor urban families. Other important needs of this group are: family support (cited by 18 percent), child care, substance abuse prevention, and education (each cited by fewer than five percent). Family support, most often a specific reference to adult job training and placement, was the second-ranked need in cities of all sizes.

Housing likewise dominates as the critical need for low-income families in all regions. It is cited by three out of four officials from the West, more than two of three from the Northeast and Midwest, and by one of two from the South. Family support services rank second, cited by about three out of ten southern officials and between 12 and 16 percent of officials from other regions.

6. The need for housing is not confined only to the urban poor. It is a priority for almost every type of family, topping the list of priorities for all urban families and in the top five for all but high-income families.

Affordable, decent housing is a problem to more than the poor. Rather, officials see it as among the most important needs for all their families except those of high income.

This perception on the part of city officials is, perhaps, not surprising given recent trends in housing costs and family income. As Harrington (1987) notes, between 1970 and 1980, median rental costs rose 120 percent, while the median income of renters rose only 66 percent. At the same time, affordable housing was disappearing from the market. And, according to a federal study conducted in 1980, families with children are often excluded from rental housing: from a fourth of all rental housing and from 60 percent of housing built since 1970.[21]

The need for housing is not confined to any particular region of the country. For each of the four regions, housing ranks among the top five needs for all families and for every type of family except high-income families. For all family types, however, housing tends to rank higher on the priority lists from the Northeast and West than from the Midwest and South.

7. For middle-income city families the needs are more diverse, and no single need predominates, although family support services rank first.

While housing alone accounts for about two-thirds of all responses for low-income families, the needs of middle-income families are more evenly dispersed. No single need dominates respondents' lists; family support – typically counseling/information services – tops the list, but with only 27 percent of responses. Child care, the second most common answer, polls 23 percent of responses, while alcohol/drugs is the choice of 20 percent of those surveyed. Recreation and housing each account for about 10 percent of responses. As noted, this pattern is quite unlike that observed for low-income families where the top-ranked need, housing, was ranked first by fully 67 percent of officials.

At the same time, the needs of middle-income families are not totally dissimilar to those of low-income families. Most obviously, while housing is not perceived as the most critical need for middle-income families, it is among the top five needs identified for this group.

Because cities tend to have disproportionately larger populations of low-income families, it may be tempting to overlook the very real needs of middle-income households. As one respondent notes, there may be a tendency to "stress programs for low-income families while forgetting that those who fall just above the poverty line have needs which are unfulfilled."

The survey responses support this observation; officials' suggestion of family support services as a key need implies, and recent trends confirm, that this group of families has come under increasing economic pressure. Middle-class status, for many, is not the secure sinecure it was once believed to be. The middle class now receives a smaller share of the national income than in previous years. In 1986, the middle fifth of all U.S. families received only 16.8 percent of the total national family income, the lowest share recorded for this group since 1947.[22]

The pattern – an array of needs, ranked but by slim, rather than substantial, margins – also holds when data for middle-income families are analyzed separately by city size and by region. The few differences are not large.

8. For upper-income families, too, no one need predominates. The most commonly cited need, however, is for substance abuse prevention services.

The needs of high-income families appear to be very consistent: regardless of city size, alcohol and drug abuse prevention programs, family support (most often counseling and information services), and recreational activities are uniformly cited as the three greatest priorities. More than one-third of cities in each group cite alcohol and substance abuse prevention as the greatest need, with family support second. Regional analyses yield similar results. While the ranking differs slightly by region, substance abuse prevention and family support services are most often named as the most pressing needs for affluent families.

> A growing number of privileged youth suffer from spiritual poverty...'affluenza'. Symptoms include boredom, low self-esteem, lack of motivation... psychiatrists are finding parallels between children of the urban rich and poor.
>
> They both suffer from broken homes and absentee parents...both move around easily accessible drugs, alcohol, and sex.[23]

9. The pattern of needs for single-parent families is both similar to and different from the patterns seen for the other family types.

For all cities, child care is viewed as the most pressing need for single-parent families with children. It is cited as the most pressing need by about two of every five officials. This perception is in line with the current reality that the vast majority of single-parent homes are headed by women and, further, that roughly three of every five such mothers are employed outside the home.[24]

While child care is clearly a critical need for single-parent families, it is not the only need. While child care ranks first with 39 percent of the responses, family support (most often job training/placement and education for parenthood) ranks second with one-

third of all responses. Housing, mentioned by 17 percent of the officials, rounds out the top three needs for urban single-parent families.

This pattern holds true regardless of city size. There is general agreement across cities that these three needs are the most critical ones for these households. In cities with more than 300,000 residents, however, child care and family support share the top rank. Regional results are quite similar, although in both the Northeast and South, family support services are slightly more pressing for single-parent households than child care. The reverse order prevails in the Midwest and West.

Single-parent families are no longer atypical, and in fact they are the fastest growing family formation in the country. As Garfinkel (1988) notes:

> For reasons not entirely understood, a change in marital behavior has been occurring in the United States....Permanent marriage is on the wane. Whites marry and increasingly divorce; blacks are increasingly likely never to marry at all. The result has been an explosion in the number of single parent families.[25]

In 1970, just one family in ten was headed by a single parent; by 1984, the figure was one in five and, during 1987, one out of every four children resided in a single-parent household.[26] Recent estimates suggest that 42 percent of all white children and 86 percent of all black children born in the late 1970s will live in a family headed by a single woman before their eighteenth birthdays.[27] Of children born in 1987, 61 percent will reside for some period of time with only one parent.[28] Single-parent households with children are also particularly vulnerable to poverty; today, fully 50 percent of female-headed families are poor by official measures. Many local officials no doubt share the sentiment expressed by the respondent from Huntington Beach, California that "the crisis in our city is the lack of long-range solutions to the problem of single-parent families."

10. The needs of two-parent families closely parallel those of single-parent families, except that the order of the top two needs is reversed. Family support, rather than child care, is seen as the most pressing need for two-parent city families.

Family support, most specifically counseling and information and education for parenthood, (40 percent) and child care (27 percent) lead the list of needs for two-parent households with children. The same two needs, but in reverse order, also rank first and second for single-parent households.

The more common two-parent household, in which both parents work outside the home, has its own set of needs and problems. Child care is obviously an issue, but other problems suggest the potential wisdom of making family support services available. These range from day-to-day questions, such as who will be responsible for taking time

off from work for children's medical appointments, to more general issues related to sharing of household duties, lack of leisure time, role conflicts, and time management.[29]

Responses from all three city size groups (50,000 to 100,000, 100,000 to 300,000, greater than 300,000) agree that family support and child care are the number one and two needs, respectively, for two-parent city families. Officials consistently identified substance abuse prevention and treatment as the third most important priority for these families. Regional patterns are similar; in all parts of the country, family support and child care rank first and second, respectively, for two-parent families.

Summary

Certain needs – like housing and family support – are nearly universal for city families, regardless of the size of the city or the region of the country. These two needs dominate the list of needs for all families in all cities and for all low-income families in all cities as well. For middle- and high-income families, needs are more dispersed. While the order differs somewhat, family support, child care, and substance abuse prevention are seen as important needs. Responses are consistent, too, for high-income families. For this group, alcohol and substance abuse prevention and family support services, such as counseling and information, are most commonly noted. The top two pressing needs identified for single-parent and two-parent households are identical: family support and child care. However, while child care ranks first and family support second for single-parent families, this order is reversed for two-parent households.

4. Prominence Of Issues Affecting Families and Children

> If our citizens are in trouble, we must serve as advocates to secure responses from other levels of government, and as catalysts to mobilize the resources represented by citizen volunteers and corporate giving.[30]

> Efforts [to improve the lives of children and families] are plausible only if there is community-wide support and involvement...school superintendents, business leaders, local government...together with parents, community organizations and even state government policy-makers.[31]

The preceding chapters show clearly that, in the eyes of city hall officials, urban children and families have myriad pressing needs. Identifying a need, however, is not the same as dealing with it. Before anything can be done about it, the issue or problem must become a priority item on political and community agendas. Survey respondents were asked several questions about the prominence or lack of prominence of issues affecting families and children in their communities and the role of various actors in bringing those issues to city hall attention.

Prominence of Issues

City officials were asked to indicate their perception of how prominent children and family issues are in their communities, as measured through their inclusion and emphasis in important local media or civic events. Respondents were asked to rate the prominence of such issues on a four point scale ranging from "not evident" (a score of

one) to "very prominent" (a score of four). Table 4-1 shows responses to these questions.

Table 4-1
Degree of Prominence of Children & Family Issues
(Percent of All Cities)

Item	Degree of Prominence			
	Not Evident	Moderately Visible	Prominent	Very Prominent
Election coverage	25	52	18	6
Election material	28	47	19	6
Civic group agendas	9	52	32	7
Routine media coverage	11	56	28	5

1. **These four facets of community life reflect at least moderate attention to issues affecting families and children.**

2. **In 75 percent of the cities, issues affecting families and children are at least moderately visible in election editorials and reporting in local television, radio, and print media.**

More than one-half (52 percent) of all questionnaires give this rating, a two on a scale of one to four. In another one-fourth of the cities, children and family issues are thought to be prominent or very prominent. Only about one out of four officials says child and family issues are accorded very little or no media attention.

These issues are somewhat more likely to be prominent or very prominent in the Northeast (34 percent) and South (26 percent) and less likely to be so in the West (20 percent) and Midwest (19 percent). Also, as the size of the city increases, so does the proportion rating child and family issues as prominent or very prominent in election materials and reporting. Proportions vary from 17 percent in cities with populations between 50,000 and 100,000 to 37 percent in cities with more than 300,000 residents. Table 4-2 illustrates this trend.

Table 4-2
Prominence of Issues in Election Reporting by Size of City
(Percent of Cities in Size Group)

Rating	50,000-100,000	100,000-300,000	Greater than 300,000
Very Prominent	3	9	9
Prominent	14	20	28
Moderately visible	53	49	51
Not evident	30	22	12

3. Issues affecting families and children are, typically, at least moderately visible in local candidates' campaign literature, speeches, position papers, and advertisements.

The finding that in three of four cities issues affecting children and families receive at least some local media election coverage attention is consistent with our finding concerning the visibility of these issues in local candidates' campaigns. Here, too, such issues are at least moderately visible in about 70 percent of the cities; they are visible or highly visible in about one out of four cities.

Larger cities are more likely to report that these issues are prominent or very prominent in local candidates' campaigns. Of the cities with populations greater than 300,000, 44 percent report this is the case. Of the cities between 50,000 and 100,000 residents, on the other hand, only 16 percent rate these issues as prominent or very prominent in campaign materials. For cities of intermediate size (100,000 to 300,000), the proportion is 29 percent. Table 4-3 illustrates similarities and differences by size of city.

Table 4-3
Prominence of Issues in Campaign Material by Size of City
(Percent of Cities in Size Group)

Rating	50,000-100,000	100,000-300,000	Greater than 300,000
Very Prominent	4	7	12
Prominent	13	22	33
Moderately visible	49	47	42
Not evident	35	25	14

There are regional differences, as well. These issues are least likely to be prominent or very prominent in midwestern cities (18 percent) and most likely in the Northeast (29 percent) and West (28 percent).

4. Issues affecting urban children and their families are more prominent on local civic groups' agendas than they are in election coverage and campaign materials.

Respondents feel that issues of direct interest to families and children are somewhat more evident on the agendas of local civic groups. Civic groups give children and family issues at least some prominence (32 percent), if not great prominence (7 percent).

The prominence of these issues also appears to vary somewhat by size of city and region of the country. About one-half of the larger cities, those with populations over 100,000, rate family and children's issues as prominent or very prominent on civic groups' agendas, compared to about 28 percent of cities with populations between 50,000 and 100,000 persons. Table 4-4 presents these data.

Table 4-4
Prominence of Issues on Civic Group Agendas by Size of City
(Percent of Cities in Size Group)

Rating	50,000-100,000	100,000-300,000	Greater than 300,000
Very Prominent	4	8	16
Prominent	25	41	37
Moderately visible	59	45	42
Not evident	13	5	5

Cities in the western United States are most likely to say that issues affecting families and children are prominent or very prominent on civic groups' agendas (43 percent). In both the Northeast and South, the proportion is 38 percent, while in the Midwest it is 34 percent.

5. These issues, too, are perceived as receiving more attention in day-to-day local media than they do in election reporting and campaign literature.

Day-to-day media coverage, perhaps not coincidentally, also gives at least some degree of attention or prominence to these issues, according to survey respondents. Overall, 28 percent rate such coverage as prominent while five percent rate it as very prominent.

Table 4-5
Prominence of Issues in Day to Day Media Coverage by Size of City
(Percent of Cities in Size Group)

Rating	50,000-100,000	100,000-300,000	Greater than 300,000
Very Prominent	2	8	10
Prominent	25	32	33
Moderately visible	60	51	55
Not evident	14	10	2

General media coverage of children's issues is less likely to be seen as prominent or very prominent (27 percent) in cities under 100,000 in population than in cities with larger populations, as shown in Table 4-5.

Fewer midwestern (25 percent) and western (30 percent) cities report this coverage as prominent or very prominent than northeastern (37 percent) and southern cities (42 percent).

Key Players

Given the pluralistic system of American government and the remarkable diversity of the nation's cities, there are many ways to bring children and family issues to the attention of city hall officials. But what commonalities exist? We asked, "Who plays an important role in bringing child/family issues to the forefront of city hall concern?"

1. **City hall professional staff and elected city officials are almost universally seen as the persons who most often bring issues affecting families and children to the forefront of city hall attention.**

    - Diverse other persons and groups also participate in this process.

Insider information and activity, specifically that of city hall professional staff (94 percent) and elected officials (85 percent), is cited by more than eight out of ten respondents as a vehicle through which child and family issues become matters of great concern. Elected officials and staff predominate, but school districts, task forces, service organizations, and other levels of government are also seen as central to this process. Neighborhood groups and public interest organizations are also cited by more than half of all cities as successful advocates for these issues.

Table 4-6 illustrates these points and the number and diversity of groups involved in these issues at the city hall level. Items listed are cited on at least one out of every four questionnaires.

Table 4-6
Key Players on Behalf of Children and Families

Key Players	Percent of Cities
City hall professional staff	94
Elected city officials	85
School district	69
Neighborhood groups	68
Task force recommendations	63
Youth-serving organizations	61
Federal government	55
Social welfare organizations	54
State government	54
Avail of new funds	53
Public int. organizations	52
Religious organizations	48
Media coverage	46
Local businesses	45
Formal needs assessment process	41
Charitable foundations	39
County government	37
United Way	36
Chamber of Commerce	29

Other groups also mentioned include police departments, YMCAs, city agencies, local hospitals and health departments, park districts, parks and recreation bureaus, and civic groups such as the Kiwanis, Lions, Jaycees, and Rotary.

When responses are broken down by size of city, both similarities and differences can be seen. Regardless of population, professional staff members and elected city officials are seen as the most common means through which child and family issues rise to prominence. Neighborhood groups are also on the top five list regardless of city size.

Task forces have more clout in big cities (greater than 300,000), ranking third behind staff and elected officials as a way to set issues on the local agenda. This is consistent with a 1988 survey of 52 of America's principal cities that found that more than half had a citizens' task force, commission, or other public body charged with overseeing broadly defined children's issues.[32] Rankings by city size are summarized in Table 4-7. (Details are in Table B-6 in Appendix B.)

Table 4-7
Key Players by Size of City
(Percent of Cities in Size Group)

50,000-100,000		100,000-300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
City Hall staff	95	City Hall staff	96	City Hall staff	91
Elected officials	84	Elected officials	88	Elected officials	84
School district	68	School district	74	Task force	82
Neighborhood groups	65	Task force	73	Youth services	77
Federal government	54	Neighborhood groups	70	Neighborhood groups	75

In all areas of the country, city hall professional staff are identified as most influential in bringing child and family issues to the forefront of attention, and elected city officials rank second.

2. Regardless of the issue, professional city hall staff are mentioned most often as playing a major role in bringing the subject to the forefront of city hall attention.

City hall professional staff play a key role regardless of the issue. For eleven out of the twelve major survey topics, city hall staff are most often the persons bringing the issue to the forefront of city hall attention. They rank second only in the area of education, for which the local school district is the most often cited key player.

Elected officials likewise play a dominant role in many family and children's issues. They are the second most frequently mentioned key players in housing, recreation, youth employment, substance abuse, and family support. In addition, they are among the top five sources reported for all other topics except teen pregnancy.

5. City Hall Involvement In Issues Affecting Families and Children

> People who need services live at the local level and therefore even federal and state-operated programs must meet clients in some locale...although another unit of government or a private delivery agent [may] provide services...it is the local government that is often the first point of contact for many citizens in need.[33]

Over the past five decades, the federal government has come to play a major role in setting the human services policy agenda for other levels of government. Nonetheless, the day-to-day reality is that described in the quote above. The first point of contact for families and children in need is often at the local level—a policeman, a parks and recreation worker, a city health department nurse. Whether through direct service delivery or provision of financial or in-kind support to other entities, America's city halls are involved in some fashion in virtually all areas that affect families and children.

The traditional role of local governments in providing fire, police, roads, sanitation, and similar services to community residents is well known. Their involvement in human service issues is less well appreciated even though, as federal funding decreases, many cities are pressured to respond to increased needs in these areas. Thus, we inquired about the actual and anticipated involvement of city halls in each of the thirty-four topic areas addressed in the survey.

Table 5-1
Actual Extent of City Hall Involvement: All Issues, All Cities
(Percent of all Cities)

Issue	None	Degree of Involvement Minimal	Modest	Major
CHILD CARE				
Family day care	36	22	24	19
Infant/toddler child care	30	23	24	23
Pre-school child care	26	19	30	25
School age child care	28	23	26	24
HEALTH				
Pediatric/adolescent AIDS	49	19	23	10
Prenatal/well baby care	39	14	21	26
Adolescent health clinics	48	20	20	12
Nutrition	33	22	29	17
ADOLESCENT PREGNANCY				
Teen pregnancy prevention	33	23	26	18
HOUSING				
Low-income housing	5	11	31	54
Emergency shelters	15	16	32	37
Homelessness	14	18	26	42
FAMILY VIOLENCE				
Child abuse	16	26	36	21
Spousal abuse	20	28	36	17
JUVENILE JUSTICE				
Delinquency prevention	8	24	36	31
Runaways/status offenders	16	32	33	19
Gangs	21	29	31	20
RECREATION				
Community centers	8	8	21	64
Parks/playgrounds	2	5	15	78
Recreation activities	2	4	19	75
YOUTH EMPLOYMENT				
Job training and placement	23	17	28	32
Youth conservation corps	55	22	15	9
Summer job programs	11	17	27	45
ALCOHOL/DRUGS				
Adolescent treatment	31	27	24	18
Substance abuse prevention	14	17	33	36
CHILD WELFARE				
Adoption	73	14	9	4
Foster care	68	16	10	6
Neglect	50	24	15	11
FAMILY SUPPORT				
Counseling/information	28	26	30	16
Educcation for parenthood	39	28	25	9
Adult job training and placement	32	23	17	29
EDUCATION				
Early childhood education	46	20	18	16
Dropout prevention	40	19	27	15
School counselors	56	16	18	11

Actual Involvement in Child and Family Issues

The survey asked about the current extent of city hall involvement, direct or indirect, in all thirty-four topics affecting city families and children. Our major finding here is as follows:

1. Many city halls are involved, to some extent, in each of the thirty-four topics referred to in our study and their degree of involvement is greater than might be commonly thought.

Some issues, such as recreation, are traditionally associated with city hall. Other levels of government, however, carry chief programmatic and fiscal responsibility in other areas (such as adoption, foster care, day care). Despite this, some degree of city hall involvement is reported for each of the thirty-four topics, as shown in Table 5-1.

In addition to documenting city hall involvement in each of the thirty-four areas, Table 5-1 also suggests that the degree of this involvement, typically, is greater than might be commonly thought. In only four areas (youth conservation corps, adoption, foster care, education for parenthood) do fewer than 10 percent of cities report major involvement. On the other hand, major involvement is reported by at least one fourth of cities for thirteen topics (see Table 5-2).

Table 5-2
Topics with Major Involvement In At Least 25 Percent of Cities

	Percent of Cities
Parks/playgrounds	78
Recreation activities	75
Community centers	64
Low-income housing	54
Summer job programs	45
Homelessness	42
Emergency shelters	37
Substance abuse prevention	36
Job training and placement	32
Delinquency prevention	31
Adult job training and placement	29
Prenatal/well baby care	26
Preschool child care	25

When the categories of modest and major involvement are combined, it is clear that local governments are actively involved in these family and children's issues. Major or modest involvement is reported by at least 40 percent of cities for twenty-five of the thirty-four topics, as shown in Table 5-3. Only for education for parenthood and early childhood education (each 34 percent), pediatric/adolescent AIDS (33 percent), adolescent health clinics (32 percent), school counselors (29 percent), neglect (26

Table 5-3
Topics With Combined Major or Modest Involvement in At Least 40 Percent of Cities

	Percent of cities
Recreation activities	94
Parks/playgrounds	93
Community centers	85
Low-income housing	85
Summer job programs	72
Emergency shelters	69
Substance abuse prevention	69
Homelessness	68
Delinquency prevention	67
Job training and placement	60
Child abuse	57
Preschool child care	55
Spouse abuse	53
Runaways/status offenders	52
Gangs	51
School-age child care	50
Infant toddler child care	47
Prenatal/well baby care	47
Nutrition	46
Counseling/information	46
Adult job training and placement	46
Teen pregnancy prevention	44
Family day care	43
Dropout prevention	42
Adolescent treatment	42

percent), youth conservation corps (24 percent), foster care (16 percent), and adoption (13 percent) is major or modest involvement reported by fewer than four of ten cities.

The involvement reflected in these dry statistics takes many creative forms. Here are a few examples (more can be found in Appendix E):

- Scottsdale, Arizona: A partnership (city, schools, hospital) provides prevention and intervention programs in the public schools. It avoids duplication of service and creates a focus for community substance abuse activities.
- Union City, New Jersey: A program to train older workers as paraprofessional teacher aides for child care centers addresses the child care labor support shortage.
- Bakersfield, California: The city (with county and social service agency support) formed a Homeless Task Force that resulted in donation of land, furniture and equipment, and government funding for construction of a shelter. Trade unions volunteered time and materials; community organizations and the city support the shelter through contributions and fund-raising.

- Cape Coral, Florida: Licensed child care, staffed by educators, is provided before and after school at elementary schools at low cost. All programs are entirely financially self-sufficient.
- Boston, Massachusetts: Boston Against Drugs (BAD), a partnership of city government, police, schools, neighborhoods, and businesses, aims to change existing attitudes so that drug use among pre-teens and teens is not the norm.
- Nashua, New Hampshire: The city encourages development of child care sites through relaxed zoning restrictions.
- San Antonio, Texas: The city established a Day Home Accreditation Program operated by the city, the only one of its kind in the nation.

What other conclusions can be drawn from these data?

2. For all cities, issues in which the greatest percent of city hall involvement is reported are those pertaining to recreation.

3. The prominence of recreation as an area of major city hall involvement appears to be the norm, rather than the exception, in all regions of the country and in cities of every size.

4. Recreation in today's cities extends beyond traditional boundaries and may often be a vehicle through which other family and children's issues are addressed.

For the sample as a whole, city hall involvement is the greatest in leisure and recreation-related areas. More than three of every four cities report major involvement in parks and playgrounds and recreation activity programming. About two of three say community centers are also a current area of great involvement.

Recreation is traditionally a municipal responsibility, and major involvement in these functions is to be expected. The survey found, however, that the purposes served by cities' recreation departments are often broad and diverse (see Appendix E for more examples):

- Dothan, Alabama: 250 youths were hired for summer recreation and maintenance positions.
- Pico Rivera, California: Through "Walking Crew," children in grades one to five are escorted by recreation leaders after school to a local park for activities until parents can pick them up.
- Albany, New York: "The Albany Plan" provides summer jobs for youths to help combat the drug problem.

- Huntington, West Virginia: Community centers operate two latchkey programs (from 3:00 p.m. to 10:00 p.m.) with structured programming and supervision. Snacks and dinner are available.

The survey confirms what these vignettes suggest: in all regions of the country, parks and playgrounds lead the list of survey issues in which city hall's involvement is greatest, although recreation activities share the top ranking in the midwestern cities (see Table 5-4). Recreation activities rank second on all other regional lists. Community centers rank third in the South and the West; low-income housing is third in the Northeast and the Midwest. These two topics, however, are in the top five in all regions. Substance abuse prevention is in the top five only in the West, prenatal/well baby care only in the Midwest, and summer job programs only in the Northeast and the South.

Table 5-4
Topics in Which City Hall Involvement is Greatest, by Region
(Percent of Cities in Region)

	Northeast	Midwest	South	West
Parks/playgrounds	75	69	83	85
Recreation activities	64	69	80	83
Low-income housing	59	53	57	51
Community centers	56	52	72	71
Summer job programs	57	*	51	*
Prenatal/well baby care	*	40	*	*
Substance abuse prevention	*	*	*	43

* Not in top five

There are some differences by size of city in the ranking of areas of major city hall involvement, but parks and playgrounds, along with recreation activities, are among the top three areas for each size group. However, cities with populations greater than 300,000 tend to have somewhat different patterns of involvement than do smaller cities, as shown in Table 5-5.

Table 5-5
Percent of Cities with Major Involvement by Size of City

	50,000-100,000	100,000-300,000	Greater than 300,000
Parks/playgrounds	76	81	81
Recreation activities	70	80	83
Community centers	60	68	68
Low-income housing	50	55	*
Substance abuse	35	*	*
Summer job programs	*	50	81
Homelessness	*	*	77

* not in top five

5. Excluding recreation, city halls are most likely to be involved in housing, youth employment, substance abuse prevention, and delinquency prevention.

6. They are least likely to be involved in child welfare services such as adoption and foster care.

More than eight of ten cities report major or modest involvement in low-income housing, and more than two of three report similar involvement in emergency shelters and the problem of homelessness. Again, this involvement takes diverse and innovative forms (more examples can be found in Appendix E):

- Casper, Wyoming: Through an emergency repair and owner-occupied housing rehabilitation program that provides grant money and low-interest loans, more than 200 low- and moderate-income homeowners unable to qualify for private funding have been able to bring their dwellings up to code and Section 8 standards.
- Dayton, Ohio: The city created a task force and provided an unused fire station for conversion into a shelter.
- New York, New York: Through the Lend-A-Hand program, relocation time for families moving from shelters to renovated apartments was cut from two months to less than one week, resulting in substantial cost savings and tremendous benefits to families.
- Long Beach, California: Through the Cold Weather Emergency Shelter Program, a collaboration between the city, a non-profit social agency, federal, state and local governments, National Guard facilities are used as emergency shelters.

Drug Abuse Resistance Education (DARE) and similar programs are also commonly supported by city halls across the country. Local governments' universal concern with substance abuse prevention is obvious from a partial list of cities involved in such programs: Birmingham, Alabama; Buena Park, Inglewood, Hayward, Oxnard and El Cajon, California; Lynn and Boston, Massachusetts; Pontiac, Michigan; and West Seneca, New York (again, more examples can be found in Appendix E).

Nature of City Hall Involvement in Service Delivery

Given the fiscal constraints and demographic realities that characterize many American cities, we also wanted to identify the methods, direct and indirect, through which city hall involvement in child and family issues is carried out. To that end, the survey inquired about city hall provisions for service delivery, city hall administrative policy and practice, and the organization of city hall insofar as these issues are con-

cerned. Respondents were asked to describe the nature of city hall involvement in three topics of their choice. What did we learn?

1. Cities use a variety of mechanisms to provide services to children and families. Direct delivery of service and contracting with both public and private entities are most common.

More than eight cities in ten report at least some capacity for direct service delivery exists within city hall. Similarly, about seven in ten use contractual relationships (with both governmental and non-governmental entities) and city-owned buildings to make services available to urban families and children.

2. Service delivery options appear to vary depending on the size of the city. Regional differences, however, appear to be modest.

In cities with populations greater than 300,000, city hall involvement in child and family issues is most often carried out indirectly through the use of other organizations that provide services. In smaller cities, direct provision of service by the city is more prevalent.

Of the largest cities, 93 percent report contracting with non-profits, and 86 percent report providing city funds to such organizations through other than a formal contract. Proportions from cities of less than 300,000 population are, as shown in Table 5-6, considerably lower.

Table 5-6
City Hall Mechanisms for Service Delivery by Size of City
(Percent of Cities in Size Group)

Mechanism	50,000-100,000	100,000-300,000	Greater than 300,000
Direct service provision	89	86	75
Contracts w/other gov't units	66	71	80
Contracts w/non-gov't entities	61	78	93
City funds to non-gov't entities	58	70	86
In-kind support to non-gov't entity	50	64	77
Use of city land/buildings	71	75	71
Joint powers agreement	15	29	14

Regional differences are less pronounced than those among cities of different sizes. In all regions, direct provision is reported by more cities than any other service delivery option. Use of city-owned land or buildings is the second most common mechanism in southern cities, while providing city funds to non-government entities ranks second in western cities. In both the Northeast and the Midwest, formal contracting with public and private organizations is the second most commonly mentioned delivery mechanism.

3. **The frequency with which various delivery mechanisms are used varies somewhat depending on the issue involved.**

Direct service provision and provision through contractual arrangements with other public and private entities are the most commonly cited mechanisms, but there are some differences in their reported use by issue area. At least one-half of cities report direct service provision in all of the twelve major topic areas except child care (only 35 percent) and child welfare (only 40 percent). City land and buildings are most often used for juvenile justice and recreation-related functions and least often used for family violence programs. Non-governmental contractors are heavily used in child care, housing, and family support while other units of government are most often involved in delivery of youth employment and educational services.

Administrative Policy and Practice

City halls may influence child and family issues and programs through their broad governance powers and through administrative policies and practices. The extent to which these are currently used in the service of family and children's issues was also addressed in the survey. Respondents were asked to describe the administrative policies and practices used in three topics of their choice. We found:

1. **The vast majority of cities use planning and needs assessment processes to guide them in conducting business related to children and families. Other aids reported by at least half of the cities are: financial management and budget review, city ordinances and regulations, and evaluation.**

2. **There are virtually no differences by size in the identification or ranking of the various administrative policy and practice options. Regional patterns also do not vary to any significant degree.**

3. **There are no major differences by issue area in the identification of the various options, but there are slight differences in their order depending on the topic.**

Organization of City Hall

A related issue concerns the nuts and bolts of city hall organization and operation. Is there a specialized agency or department that focuses on family and children's issues? Do formally organized task forces or commissions work on these issues? To what extent are there regular meetings between city hall officials and their counterparts in other agencies?

While the existence of such mechanisms does not guarantee high visibility for family and children's issues, the absence of such mechanisms may ensure they receive less than optimal attention.

To what extent did responding cities report these and other characteristics and activities? Again, respondents selected three topics.

1. **Cities appear to use a variety of mechanisms; the most common are specialized city hall task force(s), departments/agencies, public/private partnerships, and joint projects with school systems.**

2. **There are virtually no differences by region in the identification and ranking of these various mechanisms.**

3. **Cities over 300,000 in population report somewhat different relative emphasis on the various devices than do smaller cities.**

The very largest cities, those with 300,000 or more residents, report a different ranking and emphasis than cities with populations between 50,000 and 300,000 persons. Table 5-7 illustrates these differences.

Table 5-7
Ranking of Organizational Mechanisms by Size of City

	50,000-100,000	100,000-300,000	Greater than 300,000
Separate department/agency	1	1	3
Task force/commission	2	3	1
Partnerships	4	2	2
Projects with schools	3	4	3
Regular departmental meetings	5	*	5
City hall/school meetings	*	*	3
City hall/other government meetings	*	5	4

* not ranked in top five

Cities are most likely to report the existence of specialized departments or agencies for recreation (83 percent), health (68 percent), and housing (59 percent). Public-private partnerships are reported by at least one-half of respondents in the areas of teen pregnancy, housing, child welfare, and education.

Formal Policy

Respondents were also asked to indicate whether or not their city has a written policy (ordinance, executive order, charter or general plan language, etc.) that provides a focus on programs affecting the city's children and families. We found:

1. Roughly three cities in four do not have a written policy, and in the vast majority that do not, no such policy is under consideration or in the planning stages.

This finding also holds true when data are separately analyzed by city size. Formal policies, however, are more likely to exist or be in the planning stages in the nation's largest cities (greater than 300,000) than in its smaller ones (50,000 to 300,000). About two of five of the former, compared to 21 percent of the latter say there is such a policy in effect (see Tables B-7 and B-8 in Appendix B).

Cities in the Northeast and those in the South are slightly more likely than those in the Midwest or West to have policies in place. Larger cities and those in the Northeast and West are also more likely to have such mechanisms under consideration or in the planning stages.

Anticipated Involvement

> ...without substantial investments in the development and renewal of people, the community lacks a part of its vitality. Just as a declining economic base will diminish occupational opportunity, an insufficient human development base will serve to diminish the human stock of a community. For these reasons, human service programs should concern local managers.[34]

Respondents were also asked to look ahead into the immediate future and anticipate the likelihood that their own city hall would be involved in each of the thirty-four survey topics in 1989 and 1990. In general, we found:

1. Issues of greatest involvement now (recreation-related) are also those for which involvement is predicted by the highest percent of cities to be very likely in the immediate future.

Parks and playgrounds, recreation activities, community centers and low-income housing are predicted to remain areas of city hall involvement in at least two of every three cities. Similarly, while respondents predict some involvement in both, adoption and foster care are noted as areas where few city halls would likely take on a major role. These are also areas in which little present involvement was reported. Table 5-8 shows respondents' predictions for each of the thirty-four topic areas.

Table 5-8
Likelihood of City Hall Involvement: All Issues, All Cities
(Percent of all Cities)

Issue	Definitely Not	Not Likely	Somewhat Likely	Very Likely
CHILD CARE				
Family day care	14	29	25	32
Infant/toddler child care	12	22	28	38
Pre-school child care	11	20	29	40
School age child care	10	22	28	40
HEALTH				
Pediatric/adolescent AIDS	29	27	22	22
Prenatal/well baby care	24	22	18	36
Adolescent health clinics	28	30	21	21
Nutrition	21	21	30	28
ADOLESCENT PREGNANCY				
Teen pregnancy prevention	21	24	25	31
HOUSING				
Low-income housing	3	5	23	69
Emergency shelters	8	10	29	52
Homelessness	7	11	26	56
FAMILY VIOLENCE				
Child abuse	8	22	40	30
Spousal abuse	10	25	40	26
JUVENILE JUSTICE				
Delinquency prevention	3	16	36	44
Runaway/status offenders	8	29	31	32
Gangs	11	26	25	38
RECREATION				
Community centers	4	5	19	72
Parks/playgrounds	1	3	11	85
Recreation activities	1	4	13	82
YOUTH EMPLOYMENT				
Job training and placement	14	18	23	45
Youth conservation corps	26	36	21	17
Summer job programs	7	13	18	63
ALCOHOL/DRUGS				
Adolescent treatment	17	28	25	30
Substance abuse prevention	6	12	30	52
CHILD WELFARE				
Adoption	56	28	9	7
Foster care	52	29	9	11
Neglect	38	29	18	16
FAMILY SUPPORT				
Counseling/information	20	21	33	26
Education for parenthood	27	22	32	19
Adult job training and placement	24	20	20	36
EDUCATION				
Early childhood education	33	24	19	25
Dropout prevention	28	24	25	23
School counselors	43	25	17	15

2. Issues in which the smallest proportion of respondents say their cities would very likely be involved are: adoption, foster care, neglect, and provision of school counselors.

3. Excluding recreation, respondents most often say their cities would very likely be involved in low-income housing and summer job programs for youth.

Involvement in low-income housing is thought very likely in about seven of ten cities; summer job program involvement is thought very likely by about three of five. City action is also very likely in the immediate future in the areas of homelessness (56 percent), emergency shelters (52 percent), and substance abuse prevention (52 percent).

Table 5-9 summarizes issue areas in which the largest proportion of cities said involvement during 1989-90 was very likely.

Table 5-9
Issues in which City Hall Involvement is Very Likely

Issue	Percent of Cities
Parks/playgrounds	85
Recreation activities	82
Community centers	72
Low-income housing	69
Summer job programs	63
Homelessness	56
Emergency shelters	52
Substance abuse prevention	52

4. Recreation/leisure topics rate very high on the likelihood of involvement scale in all cities and all regions. For very large cities (greater than 300,000), however, responses are somewhat different from those for smaller communities.

In all regions of the country, parks and playgrounds, along with recreation activities, are the areas in which the greatest number of cities see city hall involvement as very likely. At least three of four cities from every region say involvement is very likely. In every region, community centers, low-income housing, homelessness, and summer job programs for youth are identified by at least half of respondents as areas where involvement is very likely in the very near future. These same issues tend to dominate regardless of city size, but the order differs somewhat, as shown in Table 5-10.

Very large cities have a more extensive list of areas in which city hall involvement is predicted to be very likely. It is also worth noting that these predictions were made for the large majority of cities of the size; for each topic noted in the last column in Table

Table 5-10
Rank of Very Likely Involvement by City Size
(Percent of Cities in Size Group)

	50,000-100,000	100,000-300,000	Greater than 300,000
Parks/playgrounds	1	1	1
Recreation activities	2	2	2
Community centers	3	3	4
Low-income housing	3	4	3
Summer job programs	4	3	2
Job training/placement	*	*	4
Emergency shelters	5	4	
Homelessness	*	5	3

* not ranked in top five

5-10, more than seven of ten of the respondents from the largest cities believe city hall will very likely take an active role in 1989-90.

Trends in Involvement Over Time

Perhaps the most intriguing and potentially helpful use of the overall actual and anticipated involvement tables (Tables 5-1 and 5-8) is to compare them to determine what trends can be seen and how they relate to the pressing needs of city families and children. While the tables do not exactly mirror one another, comparison suggests the following:

1. There are no areas in which it appears that involvement on the part of city halls in general will decline or remain static in the immediate future.

The proportion of cities reporting major or modest current involvement in each issue area was compared to the proportion reporting that anticipated involvement in 1989-90 was somewhat or very likely. Regardless of whether current involvement is nearly universal (such as in recreation activities at 94 percent) or relatively uncommon (such as in adoption at 13 percent), more cities say they would be involved than currently are. This was true for each of the thirty-four topics covered in the survey. In percentage terms, at least 20 percent more cities will be involved in each of twenty-three topics; in nine of these topics, at least 30 percent more cities will be involved. The absolute increases range from 1 to 19 percentage points, with at least 10 point increases predicted for each of twenty-two topics. Tables 5-11 and 5-12 show the percentage and absolute increases, respectively, in descending order.

Table 5-11
Percentage Increases of Anticipated Involvement over Current Involvement

	Percent Increase	Rank
Youth conservation corps	58	1
Education for parenthood	50	2
Infant/toddler child care	40	3
School age child care	36	4
Pediatric and adolescent AIDS	33	5
Family day care	33	5
Adolescent health clinics	31	7
Adolescent treatment	31	7
Neglect	31	7
Early childhood education	29	10
Counseling/information	28	11
Teen pregnancy prevention	27	12
Nutrition	26	13
Preschool child care	26	13
Foster care	25	15
Spouse abuse	25	15
Gangs	24	17
Adoption	23	18
Child abuse	23	18
Adult job training and placement	22	20
Runaways/status offenders	21	21
Homelessness	21	21
Delinquency prevention	20	23
Substance abuse prevention	19	24
Emergency shelters	17	25
Prenatal/well baby care	15	26
Dropout prevention	14	27
Job training and placement	13	28
Summer job programs	13	28
School counselors	10	30
Low-income housing	8	31
Community centers	7	32
Parks and playgrounds	3	33
Recreation activities	1	34

2. For all forms of child care referred to in the study, the increases in anticipated involvement over actual involvement are among the largest absolute and percentage changes observed. While roughly half of the cities report major or modest present involvement, fully two-thirds indicate that future involvement is somewhat likely or very likely.

Consistent with officials' identification of child care as the most pressing need for their communities' youngsters aged nine years and under, the largest absolute increases (19 and 18 percentage points) are predicted for infant and toddler care and school-age child care, respectively. Increases of 14 percentage points (a tie for 4th largest with two other topics) are also predicted for each of the other two types of child care (family and pre-school) covered in the survey.

Table 5-12
Absolute Increases of Anticipated Involvement over Current Involvement

	Increase (In percentage points)	Rank
Infant/toddler child care	19	1
School age child care	18	2
Education for parenthood	17	3
Family day care	14	4
Preschool child care	14	4
Homelessness	14	4
Youth conservation corps	14	4
Child abuse	13	8
Spousal abuse	13	8
Delinquency prevention	13	8
Adolescent treatment	13	8
Substance abuse prevention	13	8
Counseling/information	13	8
Nutrition	12	14
Teen pregnancy prevention	12	14
Emergency shelters	12	14
Gangs	12	14
Pediatric and adolescent AIDS	11	18
Runaways/status offenders	11	18
Adolescent health clinics	10	20
Adult job training and placement	10	20
Early childhood education	10	20
Summer job programs	9	23
Job training and placement	8	24
Neglect	8	24
Prenatal/well baby care	7	26
Low-income housing	7	26
Community centers	6	28
Dropout prevention	6	28
Foster care	4	30
Parks and playgrounds	3	31
Adoption	3	31
School counselors	3	31
Recreation activities	1	34

In terms of percentage increases, infant/toddler child care is third with 40 percent more cities predicting future involvement, school age child care is fourth with 36 percent more cities, family day care is tied for fifth with 33 percent more cities, and preschool child care (which has greater current involvement than the other three) is tied for thirteenth with 26 percent more cities.

According to the survey, at least two of three American cities will likely be involved in some fashion in child care issues by 1990. Many cities have already begun to step up their involvement. A forthcoming NLC publication will present more than twenty-five detailed case studies of municipal involvement in child care. Appendix E of this report presents many examples drawn from the survey; here are a few of them:

- Old Bridge, New Jersey: A new after-school care program began in January, 1989.
- San Diego, California: Child care facilities are being incorporated into a several-thousand-acre parcel of City land to be developed for industrial purposes. Child care is being designed into the development prior to construction.
- St. Paul, Minnesota: A child care initiative has just begun and is exploring a possible child care trust fund, community-wide child care council, Kidsday, a hotline, and other options.
- Redwood City, California: The city has joined with the school district to form a consortium for school-age child care.

3. Alcohol and drugs, family violence, family support, and homelessness also are topics where relatively great increases in anticipated involvement over actual involvement are found.

In addition to child care topics and education for parenthood, the largest absolute increases are anticipated specifically for homelessness and youth conservation corps (tied for fourth at 14 percentage points each), substance abuse prevention and treatment interventions (13 points each), child and spousal abuse programs (13 points each), delinquency prevention efforts (13 points), and counseling/information services (13 points). Except for child and spousal abuse programs and substance abuse treatment, this pattern is consistent with the identification of these issues among the most pressing needs for families and children.

4. Youth conservation corps, education for parenthood, and pediatric and adolescent AIDS (Acquired Immune Deficiency Syndrome) are topics where the survey reveals relatively great absolute and/or percentage increases in anticipated involvement over current involvement.

Youth conservation corps, with 58 percent more cities predicting involvement, is the topic with the largest percentage increase (and is one of four topics tied at 14 points for the fourth largest absolute increase). Education for parenthood, with 50 percent more cities predicting involvement, is the topic with the second largest percentage increase (and the third largest absolute increase at 17 points). Pediatric and adolescent AIDS is tied for fifth in terms of percentage increase with 33 percent more cities predicting involvement, but, in absolute terms, its 11 point increase ranks it behind seventeen other topics.

Although Tables 5-1 and 5-8 both show these three topics with relatively few cities having or anticipating significant involvement, the relatively large increases indicate a growing awareness of these topics.

Barriers to City Hall Involvement In Issues Affecting Families and Children

The preceding sections of this chapter have discussed current and anticipated city hall involvement in thirty-four selected issues affecting families and children. Simply stated, the majority of city halls have at least some degree of involvement in these issues already and more anticipate becoming involved within the year.

A final question in this series asked officials to identify barriers or problems in their communities that need to be overcome in order to achieve involvement in these areas. Overwhelmingly, and not surprisingly, the greatest barrier to increased city hall involvement in family and children's issues is lack of funds.

In the real world of resource scarcity, the needs of young children compete with the needs of older youth for a place on the national and community agenda. Issues that affect middle-income families with children may be set against those most germane to poor families. The needs of single-parent households may, appropriately or not, compete with the needs of two-parent families for funds, attention, or both. The needs of all children, youth and families must also compete with other needs for federal, state, and local attention and resources.

Half the cities identify lack of funds as the single most important roadblock. Even cities citing other things as being more important barriers generally include fiscal constraints among their top five impediments. Three of every four cities, in fact, include lack of funds as one of the top five constraints. The central findings with regard to barriers may, thus, be simply stated:

1. **The single greatest impediment to increased involvement in family and children's issues is a lack of funds.**

2. **The lack of money is a major problem in cities of all sizes, but in the nation's very largest cities it overshadows all others.**

Seven out of every ten cities of more than 300,000 population say lack of money is the greatest impediment to their expanded participation in family and children's issues, compared to about two of five (44 percent) in cities with populations of 50,000 to 100,000 and one of two in cities with 100,000 to 300,000 residents.

In cities large and small, factors not often mentioned as impediments include: lack of political support, resistance on the part of citizen groups, lack of information about need or program implementation, inability to obtain consensus and the like. No more than one in ten, regardless of city size, cite any of these as the most critical barrier.

Regional findings are similar; in every region the most commonly noted barrier is lack of money. Sixty-four percent of the northeastern cities mention this as the number one barrier. In the Midwest and West, it tops the list in two cities of every five and in one out of every two in the South.

The implication is that city halls' expanded involvement in issues affecting families and children may not, at the local level at least, be a matter of political ignorance of problems or government's unwillingness to look for creative approaches to problem solving. Rather, it may be a matter of money. This may be an objective issue, a political issue, or both.

Nevertheless, according to officials, many cities simply do not have funds to support the interventions they believe are badly needed in many areas.

> "Children and families are bearing the brunt of homelessness, hunger, drug and child abuse and basic poverty. The city struggles to address these concerns at a time of limited economic growth and limited ability to generate new revenues." – Tacoma, Washington

> "We do a good job with what we have. I wish Washington would help." – Birmingham, Alabama

> "Kids and families in Tucson have a tougher time and are more likely to have all kinds of problems than the average American child or family. At the same time, Arizona has fewer resources. State funding is minimal and tragically inadequate in all." – Tucson, Arizona

At the same time, the respondents' comments do suggest that family and children's issues, in particular, do not fare well relative to other groups' competing claims for scarce resources:

> "Children and families seem to have a lower priority than senior citizens, veterans, and other special interests." – Clearwater, Florida

> "Needs of children and families could receive higher priority." – Hampton, Virginia

Consistent with these observations is the finding that few cities of any size cite "poor economic health of their city" as a barrier. Overall, 90 percent of cities say the health

of the local economy is not among the top five barriers; proportions are virtually identical for smaller, intermediate, and very large cities.

6. Conclusion

A letter appended to one questionnaire touches on many themes of this survey. In describing the needs of one city's families and children, its existing services, and city involvement, the letter foreshadowed many study findings. It points out the impossibility of local governments' being able, on their own, to comprehensively address all the needs identified in our study. At the same it issues an appropriate challenge. The letter is excerpted below.

> Our population has most of the family services delivery systems at its disposal....It is obvious that [we represent] a typical scenario of issues and delivery systems and equally obvious that there are no quick, easy solutions to remedying these situations.
>
> City halls can't provide comprehensive programs to address [all] problems. But, they have the structure, visibility and the self-serving need to provide the leadership necessary to organize and sustain service efforts.
>
> A city hall directory and clearinghouse for services could assist agencies to cooperate, coordinate and elaborate on services while keeping officials apprised of developing trends and would be an asset to any city both in attractiveness to new industry and in perceived value to constituents.
>
> City hall can provide an example through its employee policies and work schedules of ways to assist working parents...departments traditionally staffed 24 hours a day such as fire and police could implement a hotline for children/families in crisis.
>
> In short, city halls need to be more attuned to what could be, not to what has been.

We agree, and judging from the survey findings, so do the several hundred other city officials who took part in our research. In topic after topic, city after city, the numbers jump off the page: child care, housing, involvement, money – these few words describe the current reality facing cities, their families, their children. For this reason, conclusions about what this study really says are not difficult to reach.

1. The size of the city does not matter; the same set of problems faces families and children in large cities and small.

Quality child care, available in sufficient quantity and at an affordable price, is, overwhelmingly, the most pressing need for young people – in cities large and small, those living in the Northeast and in the West, in the Midwest and in the South. For infants, preschoolers, elementary, and middle school youngsters alike, child care is the number one need. For older children, prevention is the cities' common theme. Prevention of substance abuse, delinquency, teen pregnancy, dropping out of school – all are important needs that have few boundaries of size or region.

Housing, housing, housing. It is a pressing need of poor city families everywhere, but it is also needed by middle-income families, two-parent households and single-parent families. In every size city in every region of the country, only affluent families are thought not to confront housing as one of their most pressing needs.

Money is a problem, too. City after city reports that needs are many and great, but money is in short supply. Lack of funds is named over and over as the number one barrier to cities' expanded involvement in issues affecting families and children.

2. Cities' involvement in family and children's issues is broader and more extensive than one might think.

Thirty-four different issues appeared on the questionnaire. They ranged from parks and playgrounds to low-income housing, family day care to education for parenthood, child abuse to summer job programs. While some issues (adoption and foster care, for example) lie outside cities' fiscal or programmatic domain, city halls in every region of the country are involved, to some degree, in each of the thirty-four areas.

Cities' involvement tends to be deep as well as broad. Of the thirty-four areas, only four (youth conservation corps, adoption, foster care, and education for parenthood) show major involvement by fewer than one of ten cities. More indicative of city realities is the fact that at least one of every four cities reports major involvement for thirteen of the thirty-four areas.

3. Creativity in the face of tight resources and tremendous needs is also a hallmark of city involvement nationwide.

From Scottsdale, Arizona to Union City, New Jersey, and from Bakersfield, California to Nashua, New Hampshire, come examples of innovative ways to address needs. Creative partnerships and use of governance powers and the involvement of businesses and unions are among the many original approaches being used to help local residents. Success stories were many. Eighty percent of the respondents provided a success story; they are briefly noted in Appendix E. The willingness to experiment pervades the responses and appended materials from cities of every size.

4. Recreation in cities today extends beyond traditional boundaries, and it is a means through which many family and children's needs are being addressed.

Recreation is an area in which city hall involvement is great in every region of the country and in cities of every size.

Parks, playgrounds, recreation activities, community centers—these have been and remain traditional areas of city activity. Yet in today's cities, recreation means much more. It may mean operating programs for latchkey children in Huntington, West Virginia; providing after-school programs specifically for the children of working parents in Pico Rivera, California; or hiring youths for summer maintenance and recreation positions in Dothan, Alabama, and Albany, New York.

The non-traditional and creative ways in which cities of all sizes use their recreation departments to meet the needs of children and families is just one reflection of the overall sense of cities that we take from this survey. Each of the survey topics provides its own examples of the needs of children and families and the concern and creativity of local government.

Across the nation, city officials are acutely and consistently aware of the needs of families and children in their communities. They openly admit that the needs exceed their resources, but they are working creatively and effectively with what they have.

Appendix A: The Research Process

The results reported in this monograph are derived from responses received to a survey of cities carried out by the National League of Cities in the winter of 1988-89. The survey was itself part of a larger NLC initiative, the Children and Families in Cities Project directed by John E. Kyle. With funding provided by grants from Carnegie Corporation of New York, the Lilly Endowment, and the Rockefeller Foundation, the Project is an ongoing effort to encourage and assist local elected officials in meeting the needs of children and families. The survey component is part of the Project's effort to map city hall interests, involvement, and needs concerning issues affecting children and families, especially those who live in poverty or who are otherwise at risk.

Method

In November 1988, a survey instrument designed specifically for the Children and Families in Cities Project was mailed to the mayors of 465 larger cities (all those with 50,000 or more inhabitants) and 325 smaller cities and towns (a random sample of those with populations between 10,000 and 50,000).

Sample and Response Rates

A total of 390 usable questionnaires were returned in time for inclusion in the database, representing an overall response rate of 49 percent for the entire sample. Two hundred seventy-eight surveys were received from the larger cities (populations of 50,000 or more), while a lesser number (112) was returned by cities with populations between

10,000 and 50,000. Response rates were 60 percent for cities with over 50,000 residents and 34 percent for cities with 10,000 to 50,000 people.

Table A-1
Survey Responses by Region and Size

Region	Size Group	Surveys Sent	Surveys Received
Midwest	10,000 to 50,000	92	35
	50,000 to 100,000	71	43
	100,000 to 300,000	28	19
	over 300,000	12	11
	Totals	203	108
Northeast	10,000 to 50,000	96	31
	50,000 to 100,000	85	37
	100,000 to 300,000	21	11
	over 300,000	7	7
	Totals	209	86
South	10,000 to 50,000	84	29
	50,000 to 100,000	53	24
	100,000 to 300,000	45	27
	over 300,000	19	15
	Totals	201	95
West	10,000 to 50,000	53	17
	50,000 to 100,000	76	49
	100,000 to 300,000	35	24
	over 300,000	13	11
	Totals	177	101
Grand Totals		790	390

The number of larger cities responding is sufficient to permit generalizations about all larger cities to be made. No such inferences can be made about the universe of small cities, however, because of the insufficient number of completed questionnaires. Small city results, therefore, reflect only the cities that participated in the survey; we cannot generalize to the universe of small cities nationwide.

The body of the report addresses only results for cities with populations in excess of 50,000 persons. Small city data, however, have been analyzed and, for informational purposes, are presented as Appendix C. Regional similarities and differences are noted as appropriate thoughout the report and Appendix C.

Respondents

Mayors were requested to have the survey completed by the person or persons (elected, appointed, or civil service) in city hall who were most knowledgeable about city hall interest and involvement in children and family issues (see Table A-2). While more than one person could and, in some cases did, assist in survey completion, only one instrument per city was included in the database.

Table A-2
Respondents by Title

Title	Percent of respondents
Mayors and their assistants	19.6
Human services directors	19.3
City managers and their assistants	14.5
Parks and recreation directors	10.7
Youth services directors	7.5
Community development directors	5.3
Planning directors	5.3
Other (about 20 various titles)	18.1

Caveats

Although the questionnaire was a relatively straightforward one, the subject matter it covers – issues of concern about city families and children – is clearly not. Moreover, terminology differs from place to place. The term "family support", for example, may refer to one constellation of services in one part of the country but be conceptualized differently elsewhere. Given that virtually all public policies have at least indirect effects on families and children, it was hard to decide which items to include and which to exclude from the questionnaire.

Because of the complexity and possible scope of the subject matter and the diversity of terms, an expert panel of city officials, academicians, advocates, and researchers met to discuss instrument design. Aided by these deliberations, the Project's final instrument focused on thirty-four topics, listed in Table A-3.

No attempt was made to provide conceptual definitions for the thirty-four topics, nor were operational definitions provided except insofar as each of the twelve major areas (education, for example) were delimited by the specific topics (early childhood education, for example) subsumed under it.

In retrospect, this may have caused some respondents to not mention certain issues or topics of critical importance to their cities because those topics did not fit neatly into one of the survey's predetermined categories. The result may be that some important topics are not represented in survey results.

Table A-3
Survey Topics

CHILD CARE
- Family day care
- Infant/toddler child care
- Preschool child care
- School age child care

HEALTH
- Pediatric and adolescent AIDS
- Prenatal and well baby care
- Adolescent health clinics
- Nutrition

ADOLESCENT PREGNANCY
- Teen pregnancy prevention

HOUSING
- Low-income housing
- Emergency shelters
- Homelessness

FAMILY VIOLENCE
- Child abuse
- Spousal abuse

JUVENILE JUSTICE
- Delinquency prevention
- Gangs
- Runaways/status offenders

RECREATION
- Community centers
- Parks & playgrounds
- Recreation activities

YOUTH EMPLOYMENT
- Job training/placement
- Youth conservation corps
- Summer job programs

ALCOHOL AND DRUGS
- Adolescent treatment
- Substance abuse prevention

CHILD WELFARE
- Adoption
- Foster care
- Neglect

FAMILY SUPPORT
- Counseling/information
- Education for parenthood
- Adult job training/placement

EDUCATION
- Early childhood education
- Dropout prevention
- School counselors

Appendix B: Supplemental Tables (Larger Cities)

Table B-1
Most Pressing Need for Low-Income Families By Size of City
(Percent of Cities in Size Group Citing Need)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Housing	67	Housing	67	Housing	68
Family support	17	Family support	17	Family support	25
Child care	4	Child care*	4	Education	5
		Alcohol/drugs	4		

* tie; all others 2 or less for each

Table B-2
Most Pressing Need of Middle-Income Families by Size of City
(Percent of Cities in Size Group Citing Need)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Family support	31	Child care	24	Child care	28
Child care	22	Family support	25	Alcohol/drugs	21
Alcohol/drugs	20	Alcohol/drugs	19	Family support	8
Recreation	12	Housing	11	Housing	8
Housing	6	Recreation	8	Recreation	5

Table B-3
Most Pressing Needs for High-Income Families by Size of City
(Percent of Cities in Size Group Citing Need)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Alcohol/drugs	35	Alcohol/drugs	35	Alcohol/drugs	37
Family support	30	Family support	26	Family support	23
Recreation	17	Recreation	20	Child welfare	9
Child care	6	Child care	11	Child care*	6
Recreation*	6	Juvenile justice*	6	Education*	6

* Tie

Table B-4
Most Pressing Need for Single-Parent Families By Size of City
(Percent of Cities in Size Group Citing Need)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Child care	37	Child care	40	Child care*	39
Family support	32	Family support	31	Family support*	39
Housing	18	Housing	21	Housing	10
Education	5				

* Tie

Table B-5
Most Pressing Need for Two-Parent Families By Size of City
(Percent of Cities in Size Group Citing Need)

50,000 - 100,000		100,000 - 300,000		Greater than 300,000	
Need	**%**	**Need**	**%**	**Need**	**%**
Family support	40	Family support	40	Family support	42
Child care	24	Child care	28	Child care	32
Alcohol/drugs	12	Alcohol/drugs	10	Alcohol/drugs*	5
Housing	9	Housing	6	Child welfare*	5
Recreation	5				

* Tie

Table B-6
Key Players on Behalf of Children and Families By Size of City
(Percent of Cities in Size Group)

	50,000 - 100,000	100,000 - 300,000	Greater than 300,000
City hall professional staff	95	96	91
Elected city officials	84	88	84
School district	68	74	66
Neighborhood groups	65	70	75
Task force recommendations	53	73	82
Youth-serving organizations	53	65	77
Social welfare organizations	46	64	64
Federal government	54	50	68
State government	50	58	61
Availability of new funds	48	60	59
Public interest organizations	47	56	59
Religious organizations	38	58	64
Media coverage	36	54	66
Local businesses	37	58	48
Needs assessmt process	29	60	48
Charitable foundation	30	44	59
County government	34	40	43
United Way	27	41	52
Chamber of Commerce	24	34	34
Courts	16	26	30
Local college/university	12	33	23
Advent of new city hall administration	14	19	30
Urban League	7	23	43
Junior League	5	18	27
Unions	4	19	18

Table B-7
Written Policy on Children and Families by Size of City
(Percent of Cities in Size Group)

Written Policy	50,000 - 100,000	100,000 -300,000	Greater than 300,000
Yes	21	27	41
No	79	73	59

Table B-8
Policy on Children and Youth Being Considered by Size of City
(Percent of Cities in Size Group)

Under Consideration	50,000 -100,000	100,000 - 300,000	Greater than 300,000
Yes	18	16	38
No	82	84	62

Appendix C: Analysis of Small City Responses

As mentioned in the report, the 112 surveys returned from cities with populations between 10,000 and 50,000 (see Table C-1) is not a large enough number to permit generalization to the universe of such cities in the United States. Thus we are unable to make reliable statements about child and family issues in these communities as a whole based on these data. But we believe our findings may suggest patterns and realities that could prevail in America's smaller cities. At minimum, our findings are an accurate representation of perceptions in the 112 cities that did respond.

Table C-1
Survey Responses by Region and Size (Small city data)
(Cities 10,000 to 50,000 in population)

Region	Surveys Sent	Surveys Received
Midwest	92	35
Northeast	96	31
South	84	29
West	53	17
Totals	325	112

I. The Most Pressing Needs of Children

Officials from cities with populations between 10,000 and 50,000 persons responded to the question, "What is the most pressing need in your city or town?" for each of five age groups of children (0-2 years, 2-5 years, 5-9 years, 9-14 years, 14-18 years). Summary responses concerning all five age groups are shown in Table C-2.

Table C-2
The Most Pressing Needs of City Children 0-18 Years (Small city data)

	Percent of Cities*
1. Child care	87
2. Alcohol/drugs	48
3. Recreation	37
4. Education	23
5. Youth employment	17

* Officials were asked to name the most pressing need for each of five age groups of children. Thus, five spearate need responses were given by each respondent. Numbers in the table represent the percent of cities that gave the listed response for at least one of the five age groups. Percents total more than 100 because many cities identified child care, for example, as the most pressing need for more than one of the five age groups.

This pattern of response was generally true, too, for central cities, suburbs, and rural areas and for all four regions of the country. In all regions, child care, alcohol and drugs (specifically substance abuse prevention), and recreation ranked first, second, and third, respectively, as shown in Table C-3.

Table C-3
The Most Pressing Needs of Children by Region (Small city data)

Northeast	Midwest	South	West
Child care	Child care	Child care	Child care
Alcohol/drugs	Alcohol/drugs	Alcohol/drugs	Alcohol/ drugs
Recreation	Recreation	Recreation	Recreation
Health	Youth employment	Education	Education

Child care and substance abuse prevention, it will be recalled, also ranked first and second, respectively, in cities with populations greater than 50,000. However, neither recreation nor youth employment appeared on the larger cities' top five list; there, health and pregnancy prevention rounded out the list. Education, like child care and substance abuse prevention, was common to both lists.

As was also the case in larger cities, the responses shown in Table C-2 reflect needs common to all children (such as education) as well as problems and services that are

more directly age-linked. Table C-4 shows small city officials' list of priorities for children of various ages.

Table C-4
Ranking of Needs of City Children by Age Group (Small city data)
(Percent of Cities Citing Need as Top Need for Each Age Group)

0-2 years		2-5 years		5-9 years		9-14 years		14-18 years	
Child care	79	Child care	80	Child care	60	Alcohol/drugs	33	Alcohol/drugs	35
Health	10	Education	6	Recreation	11	Recreation	26	Youth Employmt	17
Child welfare	5	Health	4	Family Violence	7	Juvenile Justice	8	Recreation	15
Family Support	4	Family Violence	4	Alcohol/drugs	5	Child care	7	Education	12
Housing	2	Housing	2	Family Support	5	Education	6	Teen pregnancy	11
		Family support	2	Health	3	Family Violence	6		
				Housing	3				

Although they may not be an accurate representation of how all small town officials perceive the needs of their communities' children, what do these limited data suggest about the views of our respondents?

1. **With the exception of older children (14 to 18 years), small town (10,000 to 50,000) findings are quite similar to those of larger cities.**

2. **As was true of their counterparts in larger cities, small town officials rate child care as the most pressing need for children and as the most pressing need for three of the five age groups (0-2 years, 2-5 years, 5-9 years).**

3. **Child care here, too, is not the only area in which a great need is seen. Education, alcohol and drugs (substance abuse prevention), and recreation also appear on the overall top five list and also on at least three of the five age-specific lists.**

4. **As was the case in larger cities as well, these respondents tend to perceive one dominant need (child care) for the three youngest age groups.**

5. **A more diverse pattern of needs is seen for small town youngsters from nine to fourteen and from fourteen to eighteen. For both groups, however, substance abuse prevention ranks first.**

6. **Small city results differ most noticeably from those of larger cities for the fourteen- to eighteen-year-old age group. Specifically, teen pregnancy prevention ranks fifth in smaller cities, but in cities with more than 300,000 residents, pregnancy prevention ranks second.**

II. The Most Pressing Needs of Families

While the needs of children and families often overlap, the survey asked city officials to consider these issues separately and to name the most pressing need for each of five different types of families in their communities. Table C-5 summarizes the responses about all five types.

Table C-5
The Most Pressing Needs of City Families (Small city data)

	Percent of cities*
Child care	60
Family support	57
Housing	49
Alcohol/drugs	35
Recreation	20

* Officials were asked to name the most pressing need for each of five types of families. Thus, five separate need responses were given by erach respondent. Numbers in the table represent the percent of cities that gave the listed response for at least one of the five family types. P-ercents total more than 100 because many cities identified child care, for example, as the most pressing need for more than one of the five family types.

While these same needs tend to appear on the top five priority lists for the four regions of the country, there are some differences across regions. Responses from the South are most noticeably different from those from other areas. For example, child care ranks fourth (tied with recreation) on surveys returned from southern states; it ranks first in the West and Northeast and is tied for first ranking (with family support) on those from the Midwest. Table C-6 illustrates regional variations among the most important overall needs of families.

Table C-6
The Most Pressing Needs of Families by Region (Small city data)

Northeast	Midwest	South	West
Child care	Child care*	Family support	Child care
Housing	Family support*	Alcohol/drugs	Family support
Family support	Housing	Housing	Housing
Alcohol/drugs	Alcohol/drug	Child care*	Recreation
Recreation	Education*	Recreation*	
	Recreation*		

* Tie

Because of the small number of respondents from any given region, it would be both speculative and misleading to draw any firm conclusions from the findings shown in Table C-6. It does seem, however, that officials do perceive the same basic set of needs

as central ones for their communities' families, albeit perhaps with some regional variation in the relative importance or urgency of those needs.

As shown in Table C-7, officials were also asked to prioritize the needs of various types of families in their communities.

Table C-7
Ranking of Needs of City Families by Family Type (Small city data)

Low-Income	Mid-Income	High-Income	One-Parent	Two-Parent
Housing	Child care	Alcohol/drugs	Child care	Family support
Family support	Family support	Family support	Family support	Child care
Child care	Alcohol/drugs	Recreation	Housing	Alcohol/drugs

As the table shows, the same five needs are identified as most pressing in both larger cities (50,000 and over) and smaller ones (10,000 to 50,000). However, there are noticeable differences in the ranking of two of those needs depending on population. Specifically, while housing ranks first and child care third in cities with more than 50,000 residents, the reverse is true for cities with 10,000 to 50,000 residents. Other needs, however, rank the same in both: family support (second), alcohol/drugs (fourth), and recreation (fifth).

What else can be said about these results and the needs of families in small cities and towns?

1. **There are both similarities and differences between the needs of families perceived by officials of "big cities" (more than 50,000 population) and those identified by officials of cities between 10,000 and 50,000 in population.**

2. **Officials from small cities and towns perceive the same needs for low-income families (housing, family support, child care) and affluent families (alcohol/drugs, family support, recreation) as did their peers in larger cities and rank them in the same order.**

3. **The same three pressing needs are identified for middle-income families in small communities and in large cities. However, family support ranks first in large cities and child care second. The order is reversed in small towns. Alcohol/drug abuse ranks third in both.**

4. **There are no differences in the identification or ranking of needs for single-parent and two-parent households between large cities and small towns. For one-parent households, child care, family support, and housing are the most pressing needs in**

large and small cities. Child care and alcohol/drugs are the most pressing needs for two-parent families.

III. Prominence of Child and Family Issues

In cities with populations between 10,000 and 50,000, children's and family issues appear to have about the same prominence – moderately visible – they have in larger cities. Table C-8 presents the small city responses.

Table C-8
Prominence of Children's and Family Issues (Small city data)
(Percent of Cities)

Event	Very prominent or prominent	Moderately visible	Not evident
Election reporting	10	52	38
Election campaigns	12	30	58
Civic agendas	35	45	20
Daily reporting	28	50	23

Small cities differ from their larger counterparts, however, in exhibiting higher rates of "not evident" responses for each of the four events. The difference is greatest for candidates' campaign materials and speeches. Of cities with more than 50,000 residents, 28 percent reported that child and family issues were not evident in campaign materials and speeches, compared to 58 percent of the smaller cities.

Key Players

There were few differences between small and large cities in the identification and ranking of persons and groups credited for bringing child and family issues to the attention of city hall. Table C-9 (next page) lists in descending order, the key players identified by survey respondents.

Other groups mentioned by at least some respondents from smaller cities include: chambers of commerce, courts, local colleges and universities, Kiwanis, Lions, and similar groups. The top four items in Table C-9 are, in the same order, the top four on the list for larger cities. Professional staff and elected officials dominate in both small cities and large ones.

Formal Policy

Like large cities, small cities and towns are not likely to have a written policy, ordinance, regulation, or general plan language specific to child and family issues. Small cities are

Table C-9
Key Players on Behalf of Children and Families (Small city data)

Key Player	Percent of Cities
City hall professional staff	89
Elected city officials	83
School district	62
Neighborhood groups	53
Youth-serving organizations	52
Public interest organizations	44
Task force recommendations	40
Availability of new funds	35
Media	35
State government	34
County government	34
Needs assessment	32
Religious organizations	31
Social welfare organizations	31
Local businesses	30
Federal government	26
Charitable foundations	24
United Way	20

much less likely (8 percent) to have such policies or other statements than were the larger ones (26 percent). There is a direct relationship between population and the existence of formal policy in this area: as the size of the city increases, so does the proportion reporting formal policy or language dealing with child and family issues. Specific proportions were as follows: cities under 50,000, 8 percent; cities between 50,000 and 100,000, 21 percent; cities between 100,000 and 300,000, 27 percent; and cities larger than 300,000, 41 percent.

Small cities (10,000 to 50,000) are also very unlikely to be considering such policies or language; only four of the ninety-one small cities answering this question say they are. Among cities with populations greater than 50,000, 20 percent report that they are considering such policies or statements.

IV. City Hall Involvement and Barriers to Involvement in Child and Family Issues

Using a four-point scale, respondents were asked to comment on the extent, in 1988, to which their local governments were involved in thirty-four different issues or programs relating to children and families. Areas in which major involvement (a score of four) is greatest are shown in Table C-10 (page 74).

The top three items reported by small cities were the same three reported, in the same order, by large cities. However, the proportion of large cities reporting major involvement is greater for each area, often by fairly substantial margins. For parks, recreation

Table C-11
Actual Extent of City Hall Involvement: Cities between 10,000 and 50,000
(Percent of Cities Reporting Involvement for Issue)

Issue	Degree of Involvement: Major	Modest	Minimal	None
CHILD CARE				
Family day care	3	17	21	59
Infant/toddler child care	4	15	22	55
Pre-school child care	6	27	22	46
School age child care	10	20	16	53
HEALTH				
Pediatric/adolescent AIDS	1	6	17	76
Prenatal/wellbaby care	6	14	14	65
Adolescent helth clinics	1	9	13	77
Nutrition	2	14	17	66
ADOLESCENT PREGNANCY				
Teen pregnancy prevention	2	11	16	71
HOUSING				
Low-income housing	22	27	23	28
Emergency shelters	12	12	25	50
Homelessness	8	9	30	53
FAMILY VIOLENCE				
Child abuse	16	26	32	27
Spousal abuse	13	17	36	34
JUVENILE JUSTICE				
Delinquency prevention	16	8	29	14
Runaways/status offenders	9	16	33	34
Gangs	8	13	29	50
RECREATION				
Community centers	47	28	12	13
Parks/playgrounds	70	23	4	4
Recreation activities	65	27	4	4
YOUTH EMPLOYMENT				
Job training and placement	9	16	31	43
Youth conservation corps	3	8	17	72
Summer job programs	24	34	14	28
ALCOHOL/DRUGS				
Adolescent treatment	11	22	22	44
Substance abuse prevention	30	31	16	23
CHILD WELFARE				
Adoption	1	1	6	92
Foster care	2	4	7	87
Neglect	8	11	19	61
FAMILY SUPPORT				
Counseling/information	14	13	13	46
Education for parenthood	6	14	20	61
Adult job training and placement	3	4	21	72
EDUCATION				
Early childhood education	5	14	17	64
Dropout prevention	9	14	16	62
School counselors	8	11	13	70

Table C-12
Likelihood of City Hall Involvement: Cities between 10,000 and 50,000
(Percent of Cities Anticipating Involvement)

Issue	Likelihood			
	Very Likely	Somewhat Likely	Not Likely	Definitely Not
DAY CARE				
Family day care	13	26	35	26
Infant/toddler child care	14	29	33	24
Pre-school child care	21	28	30	22
School age child care	23	21	29	28
HEALTH				
Pediatric/adolescent AIDS	4	16	31	49
Prenatal/wellbaby care	12	20	25	43
Adolescent clinics	7	10	36	47
Nutrition	6	19	28	47
ADOLESCENT PREGNANCY				
Teen pregnancy prevention	5	22	29	44
HOUSING				
Low-income housing	27	36	23	14
Emergency shelters	17	22	28	33
Homelessness	17	21	29	33
FAMILY VIOLENCE				
Child abuse	19	40	18	23
Spousal abuse	19	30	26	26
JUVENILE JUSTICE				
Delinquency prevention	30	46	12	12
Runaways/status offenders	14	35	33	19
Gangs	17	17	3	3
RECREATION				
Community centers	63	22	8	8
Parks/playgrounds	77	19	1	3
Recreation activities	77	17	2	3
YOUTH EMPLOYMENT				
Job training and placement	11	27	32	31
Youth conservation corps	5	16	31	47
Summer job programs	35	31	15	17
ALCOHOL/DRUGS				
Adolescent treatment	25	26	18	32
Substance abuse prevention	47	23	15	15
CHILD WELFARE				
Adoption	3	1	21	63
Foster care	4	7	27	62
Neglect	11	17	29	43
FAMILY SUPPORT				
Counseling/information	21	27	18	35
Education for parenthood	10	21	29	40
Adult job training and placement	8	10	32	50
EDUCATION				
Early childhood education	11	13	29	48
Dropout prevention	12	22	27	40
School counselors	11	13	28	51

Table C-10
Areas of Major Involvement (Small city data)

Issue	Percent with major involvement
Parks and playgrounds	70
Recreation activities	66
Community centers	47
Substance abuse prevention	30
Summer job programs	24

activities, and community centers, large city percents are 78, 75 and 64, respectively. City halls in smaller communities are involved in as diverse an array of issues as are their large city counterparts, but not to the same extent. That is, for virtually all topics, fewer small cities than large cities report major involvement.

Tables C-11 and C-12 (page 72 and 73) present small city responses for all thirty-four subject areas.

Nature of City Hall Involvement

In analyzing responses to this question for cities with populations greater than 50,000, we found a direct relationship between the size of the city and the use of other organizations to carry out activities in which the city is involved. The larger the city, the more likely it is to use indirect means, such as contracting. Table C-13 shows the frequency with which the various service delivery mechanisms are used in cities between 10,000 and 50,000 in population.

Table C-13
City Hall Mechanisms for Service Delivery (Small city data)

Mechanism	Percent reporting
Direct service provision	89
Use of city land/buildings	74
Contracts with non-gov't units	38
Contracts with other gov't units	53
City funds to non-gov't units	30
In-kind support to non-gov't units	27
Joint powers agreements	12

These results are consistent with trends seen in the larger cities – that smaller cities tend to make greater use of their own or other governments' agents to carry out service activities, while larger cities are more likely to use indirect means. Among the cities with populations less than 50,000, we find even less reliance on contracting with non-governmental organizations (38 percent) than among cities with populations

between 50,000 and 100,000 (61 percent). Direct provision of services is by far the most common method (89 percent) for smaller communities to carry out their involvement in child and family services.

Administrative Policy and Practice

While they are smaller in size, cities between 10,000 and 50,000 in population nonetheless have broad governance powers that could conceivably be used in the service of child and family issues in addition to formal needs assessments and evaluations. Table C-14 shows the extent to which various administrative and regulatory tools are used by small cities.

Table C-14
Administrative Policies and Practices (Small city data)

Practice	Percent reporting
Planning/needs assessment	74
Evaluation	44
Financial management/budget review	60
Ordinances/regulations	44
Zoning	38
Building code	26
Conditional use permits	15

These cities parallel large cities in the extent to which they use a formal planning/needs assessment process and financial management as their chief tools. Responses differ from those of large cities, however, in that no other tools were reported by more than half of the small cities. More than half of the large cities reported using city ordinances and regulations, as well as evaluation.

Organization of City Hall

Roughly eight out of ten large cities have either a specialized department within city hall or a separate city agency to deal with one or another topic concerned with children and families. Beyond that, task forces and commissions, along with public-private partnerships, are commonly used. Smaller cities show comparable patterns, although they are somewhat less likely to report any of these items than are their larger counterparts (see Table C-15, next page).

Table C-15
Organizational Mechanisms (Small city data)

Mechanisms	Percent Reporting
Separate department or agency	67
Task force/commission	42
Partnerships	44
Projects with schools	54
Regular departmental meetings	44
City hall/school meetings	38
City hall/other government meetings	34

Barriers to Involvement

There are many potential barriers to actual or expanded city hall involvement in programs for families and children. But small cities, like large ones, face the barrier of insufficient funds. Of the large cities surveyed, two in five say that lack of financial resources is the largest single impediment. Seven out of every ten cities with more than 300,000 residents cite lack of funds as the most important barrier. Small cities also cite the lack of resources as the chief constraint.

A major area of difference, however, appears in the proportion of small and large cities that say lack of funds is not one of the top five constraints. Only 26 percent of the cities over 100,000 in population say that money is not one of the top five impediments. Just more than half (51 percent) of the cities between 10,000 and 50,000 in population report that money is not in the top five impediments.

PARTICIPATING CITIES 10,000 to 50,000 (Total = 112)

Northeast

Norwich, CT
Winstead, CT
Bedford, MA
Bridgewater, MA
Everett, MA
Hyannis, MA
Lynnfield, MA
Melrose, MA
Stoneham, MA
Westwood, MA
Brunswick, ME
Pompton Lake, NJ
Saddle Brook, NJ
Summit, NJ
Canandaigua, NY
Dunkirk, NY
Fredonia, NY
Gloversville, NY
Ogdensbury, NY
Olean, NY
Oswego, NY
Saratoga Springs, NY
Scarsdale, NY
Tarrytown, NY
Altoona, PA
Bethel Park, PA
Castle Shannon, PA
Coatsville, PA
State College, PA
Wayne, PA
Whitehall, PA

Midwest

Brookfield, IL
Fairview Heights, IL
Hanover Park, IL
Hoffman Estates, IL
Lombard, IL
Matteson, IL
Pontiac, IL
Rock Island, IL
Tinley Park, IL
Winnetka, IL
Lebanon, IN
Portage, IN
Prairie Village, KS
Winfield, KS
Big Rapids, MI
Oak Park, MI
Port Huron, MI
Albert Lea, MN
Fairmont, MN
Shoreview, MN
Virginia, MN
Carthage, MO
Hazelwood, MO
Brook Park, OH
Delaware, OH
Fairborn, OH
Fostoria, OH
Girard, OH
Solon, OH
Sylvania, OH
University Heights, OH
Wickliffe, OH
Ashwaubenon, WI
Brookfield, WI
Greendale, WI

South

Dothan, AL
Vestavia Hills, AL
Forrest City, AR
Springdale, AR
Boca Raton, FL
Cape Coral, FL
Deerfield Beach, FL
Fort Myers, FL
College Park, GA
Madisonville, KY
Greenbelt, MD
Biloxi, MS
Pearl, MS
Tupelo, MS
Bartlesville, OK
Edmond, OK
Aiken, SC
Rock Hill, SC
Bedford, TX
Canyon, TX
Denton, TX
Farmers Branch, TX
Jacksonville, TX
Kerrville, TX
Lake Jackson, TX
Sugar Land, TX
University Park, TX
West University Place, TX
Fairfax, VA

West

Lake Havasu City, AZ
Paradise Valley, AZ
Banning, CA
Ceres, CA
Claremont, CA
El Segundo, CA
Fontana, CA
Palos Verdes Estates, CA
Ridgecrest, CA
Roseville, CA
San Gabriel, CA
West Hollywood, CA
Sterling, CO
Moscow, ID
Mercer Island, WA
Mount Lake Terrace, WA
Olympia, WA

Appendix D: Participating Larger Cities By Region and Population

Table D-1
Survey Responses by Region and Size (Larger city data

Region	Population Group	Surveys Sent	Surveys Received
Midwest	50,000 to 100,000	71	43
	100,000 to 300,000	28	19
	greater than 300,000	12	11
	Totals	111	73
Northeast	50,000 to 100,000	85	37
	100,000 to 300,000	21	11
	greater than 300,000	7	7
	Totals	113	55
South	50,000 to 100,000	53	24
	100,000 to 300,000	45	27
	greater than 300,000	19	15
	Totals	117	66
West	50,000 to 100,000	76	49
	100,000 to 300,000	35	24
	greater than 300,000	13	11
	Totals	124	84
Grand Totals		465	278

Midwest

50,000 - 100,000

Council Bluffs, IA
Sioux City, IA
Waterloo, IA
Arlington Heights, IL
Aurora, IL
Champaign, IL
Decatur, IL
Des Plaines, IL
Elgin, IL
Joliet, IL
Mt. Prospect, IL
Oak Lawn, IL
Oak Park, IL
Schaumburg, IL
Skokie, IL
Waukegan, IL
Bloomington, IN
Hammond, IN
Terre Haute, IN
Overland Park, KS
Pontiac, MI
Roseville, MI
Saginaw, MI
Southfield, MI
Taylor, MI
Bloomington, MN
Rochester, MN
Columbia, MO
Canton, OH
Cleveland Heights, OH
Elyria, OH
Euclid, OH
Kettering, OH
Lorain, OH
Mansfield, OH
Parma, OH
Warren, OH
Sioux Falls, SD
Appleton, WI
Janesville, WI
Kenosha, WI
Racine, WI
West Allis, WI

100,000 - 300,000

Des Moines, IA
Peoria, IL
Rockford, IL
Fort Wayne, IN
South Bend, IN
Kansas City, KS
Wichita, KS
Ann Arbor, MI
Flint, MI
Grand Rapids, MI
Lansing, MI
Livonia, MI
Sterling Heights, MI
St. Paul, MN
Springfield, MO
Lincoln, NE
Akron, OH
Dayton, OH
Madison, WI

Greater than 300,000

Chicago, IL
Indianapolis, IN
Minneapolis, MN
Kansas City, MO
St. Louis, MO
Omaha, NE
Cincinnati, OH
Cleveland, OH
Columbus, OH
Toledo, OH
Milwaukee, WI

Northeast

50,000 - 100,000

Bristol, CT
Danbury,CT
East Hartford, CT
Hamden, CT
Norwalk, CT
West Haven, CT
Brockton, MA
Cambridge, MA
Lawrence, MA
Lowell, MA
Lynn, MA
New Bedford, MA
Somerville, MA
Portland, ME
Manchester, NH
Nashua, NH
Cherry Hill, NJ
Dover Township, NJ
Middletown, NJ
Old Bridge, NJ
Trenton, NJ
Union City, NJ
Vineland, NJ
Binghamton, NY
Mount Vernon, NY
New Rochelle, NY
Niagara Falls, NY
Schenectady, NY
West Seneca, NY
Bristol, PA
Harrisburg, PA
Penn Hills, PA
Reading, PA
Cranston, RI
East Providence, RI
Pawtucket, RI
Warwick, RI

100,000 - 300,000

Bridgeport, CT
Hartford, CT
Stamford, CT
Jersey City, NJ
Albany, NY
Rochester, NY
Syracuse, NY
Yonkers, NY
Allentown, PA
Erie, PA
Cayas, PR

Greater than 300,000

Boston, MA
Newark, NJ
Buffalo, NY
New York, NY
Philadelphia, PA
Pittsburgh, PA
San Juan, PR

South

50,000 - 100,000

Tuscaloosa, AL
Fort Smith, AR
Pine Bluff, AR
Clearwater, FL
Daytona Beach, FL
Gainesville, FL
Largo, FL
Tallahassee, FL
West Palm Beach, FL
Albany, GA
Owensboro, KY
Alexandria, LA
Fayetteville, NC
Lawton, OK
Greenville, SC
Baytown, TX
Galveston, TX
Grand Prairie, TX
Plano, TX
Port Arthur, TX
Wichita Falls, TX
Lynchburg, VA
Charleston, WV
Huntington, WV

100,000 - 300,000

Birmingham, AL
Huntsville, AL
Mobile, AL
Little Rock, AR
Ft. Lauderdale, FL
Hialeah, FL
Hollywood, FL
St. Petersburg, FL
Tampa, FL
Macon, GA
Savannah, GA
Lexington, KY
Louisville, KY
Baton Rouge, LA
Shreveport, LA
Alexandria, VA
Arlington, VA
Hampton, VA
Newport News, VA
Norfolk, VA
Portsmouth, VA
Richmond, VA
Roanoke, VA
Virginia Beach, VA
Chattanooga, TN
Corpus Christi, TX
Lubbock, TX

Greater than 300,000

Washington, DC
Jacksonville, FL
Miami-Dade County, FL
Atlanta, GA
New Orleans, LA
Baltimore, MD
Charlotte, NC
Tulsa, OK
Nashville, TN
Austin, TX
Dallas, TX
El Paso, TX
Fort Worth, TX
Houston, TX
San Antonio, TX

West

50,000 - 100,000

Glendale, AZ
Scottsdale, AZ
Baldwin Park, CA
Bellflower, CA
Buena Park, CA
Burbank, CA
Carson, CA
Costa Mesa, CA
Downey, CA
El Cajon, CA
Escondido, CA
Fairfield, CA
Haywood, CA
Inglewood, CA
Irvine, CA
Lakewood, CA
Montebello, CA
Monterey Park, CA
Moreno Valley, CA
Mountain View, CA
Norwalk, CA
Oceanside, CA
Orange, CA
Palo Alto, CA
Pico Rivera, CA
Redondo Beach, CA
Redwood City, CA
Richmond, CA
San Leandro, CA
San Mateo, CA
Santa Barbara, CA
Santa Rosa, CA
Salinas, CA
Thousand Oaks, CA
Vallejo, CA
Ventura, CA
Walnut Creek, CA
West Covina, CA
Whittier, CA
Arvada, CO
Boulder, CO
Greeley, CO
Billings, MT
Salem, OR
Sandy City, UT
West Valley City, UT
Bellevue, WA
Everett, WA
Casper, WY

100,000 - 300,000

Anchorage, AK
Mesa, AZ
Tempe, AZ
Anaheim, CA
Bakersfield, CA
Fremont, CA
Fullerton, CA
Garden Grove, CA
Glendale, CA
Huntington Beach, CA
Oxnard, CA
Pasadena, CA
Pomona, CA
Riverside, CA
Sacramento, CA
San Bernadino, CA
Santa Ana, CA
Aurora, CO
Colorado Springs, CO
Pueblo, CO
Boise City, ID
Las Vegas, NV
Spokane, WA
Tacoma, WA

Greater than 300,000

Phoenix, AZ
Tucson, AZ
Long Beach, CA
Oakland, CA
San Diego, CA
San Francisco, CA
San Jose, CA
Denver, CO
Honolulu, HI
Albuquerque, NM
Seattle, WA

Appendix E: Successful Local Programs

These brief "success stories" give some sense of what cities are doing—and doing successfully—for children and families. They were extracted from the survey responses and edited by Lawrencetta Thomas, Administrative/Research Secretary for the NLC Project on Children and Families in Cities.

Child Care

Tempe, Arizona (Population: 106,911) The Tempe After School Enrichment Program is a joint city-school effort to provide after-school day care, learning experiences, and recreational activities. **Contact:** Mr. Tom Canali, P.O. Box 5002, Tempe, Arizona 85281.

Burbank, California (Population: 84,625) The city has appointed a Child Care Committee to examine all of the issues related to child care and advise the City Council on steps which should be taken to maximize service availability. The city has also joined with the school district on a community committee to address this issue as well as others affecting children. Although the work of these committees is not completed, the process is working successfully—not only because increased public attention is being focused on these issues and their potential solutions, but also because the committees involve every affected facet of the community, including government, business, schools, religious organizations, nonprofit organizations, parents, etc. **Contact:** Mr. Richard Inga, Parks and Recreation Director, P.O. Box 6459, Burbank, California 91510.

El Segundo, California (Population: 13,752) The YMCA sponsors before- and after-school child care at a local elementary school. **Contact:** Dr. Pat Scott, Executive Director, Centinela Valley YMCA, 319 E. Kelso Street, Inglewood, California 90301.

Fremont, California (Population: 131,945) In October 1987, the City Council of Fremont appointed a task force to "tackle the problem" of child care needs. In response to the task force report, the Fremont City Council adopted a 10-point program to respond to the growing child care needs in the community. The program, designed to stimulate the creation of more child care opportunities and better quality programs

in Fremont, would be financed through a partnership of private and public contributors. **Contact:** Suzanne Shenfil, P.O. Box 5006, Fremont, California 94538.

Glendale, California (Population: 139,060) The city is a member of a nonprofit organization that owns and operates an employer-sponsored child care center. **Contact:** Mr. Jess Duran, City of Glendale, Room 202, 633 E. Broadway, Glendale, California 91206.

Lakewood, California (Population: 74,654) Two years ago, through the findings of an ad hoc child care committee, the city developed a resource guide for child care services to be distributed to Lakewood residents. Updated annually, the guide serves as an excellent networking tool for services and prospective clients. **Contact:** Ms. Lisa Litzinger, 5050 N. Clark Avenue, Lakewood, California 90712.

Moreno Valley, California (Population: 90,750) The city just hired a child care coordinator on a part-time basis to assess the needs of Moreno Valley and establish programs. **Contact:** Ms. Kate Burgess, Child Care Coordinator, P.O. Box 1440, Moreno Valley, California 92388.

Pasadena, California (Population: 118,072) The city adopted a child care policy on April 11, 1988. The city provides full support of the city's child care coordinator and staff in taking steps to implement policy (for example, changing zoning for large family day care homes, looking at developer fees, and holding a successful conference for businesses). **Contact:** Ms. Lara Larramendi Blakely, M.S.W., Room 321 100 N. Garfield, Pasadena, California 91109.

Pico Rivera, California (Population: 53,387) "The Walking Crew" is a program for youth, grades 1-5, who are escorted by recreation leaders from their school (after school is out) to a local park for activities until parents can pick them up. The price is $10 a week and includes a snack. This activity is offered to working parents and is available Monday through Friday. **Contact:** Mr. Ralph Aranda, 6767 Passons Boulevard, Pico Rivera, California 90660.

Redwood City, California (Population: 54,965) The city has joined with the Redwood City Elementary School District to form a Consortium for School Age Child Care. The city has representatives on the Executive Board, serves as the fiscal agent, and provides space for the part-time coordinator. Working together, we are making child care available after school in cityand school-owned sites. **Contact:** Ms. Corrine Centeno, 1600 Middlefield Road, Redwood City, California 94067.

Roseville, California (Population: 24,347) In March 1987, an Elementary Age Before- and After-School Child Care Program was established in conjunction with the school district. Programs are offered at three of the six school sites in town. It has been very successful because of location and convenience, staffquality, and affordability. We try to keep our fees as low as possible. **Contact:** Ms. Paula Finley, Suite B, 401 Vernon Street, Roseville, California 95678.

Sacramento, California (Population: 275,741) Sacramento City included a child care center in a downtown elderly housing project. The center is operated by a private for-profit small business and gives priority to city, county, and state employees. The center is licensed for 104 children, including 22 infants and toddlers. Also, the play area is on the second-floor roof. **Contact:** Ms. Jacquie Swaback, Suite 400, 1231 "I" Street, Sacramento, California 95814.

San Diego, California (Population: 875,504) San Diego has a city-private sector initiative to plan for the incorporation of child care facilities and services into a parcel of several thousand acres of city-owned land to be developed for industrial purposes. Upon completion of the industrial development, on-site or near-site child care facilities and services will have been designed into the development prior to construction. **Contact:** Mr. Ross McCollum, Community Program Administrator, Suite 924, 1200 Third Avenue, San Diego, California 92101.

San Francisco, California (Population: 678,974) Jointly with local, state, and federal assistance, the city has provided subsidized Family Day Care for low-income parents and at the same time provided these

small businesses an opportunity to flourish. **Contact:** Lynn Bream, 100 Larkin Street, San Francisco, California 94102.

San Jose, California (Population: 649,400) San Jose established the Office of Children. **Contact:** Ms. Deborah T. Simon, Child Care Coordinator, 333 West Santa Clara Street, 8th Floor, San Jose, California 95113.

Walnut Creek, California (Population: 54,410) In November 1985, the city adopted a policy statement that recognized that adequate, affordable, and quality child care is a critical need. A report, Proposed Recommendations for Child Care Policy Implementation, was finalized in September 1986 containing a number of recommendations aimed at addressing infant care, school-age child care needs, and general child care.

On July 23, 1987, the city approved a number of the programs and activities aimed at addressing infant care needs, school-age child care needs, and improving the overall quality and quantity of child care in the community. During that same period, the City Council approved a one-year pilot program to assist local extended day care providers with the purchase of a portable facility. The city also offered to contribute $25,000 to qualified applicants on a matching grant basis.

Four applications have been received, and all four have met the program criteria within the one-year time frame. **Contact:** Ms.Lou Ann Reira-Texeira, 1666 N. Main Street, Walnut Creek, California 94596.

West Covina, California (Population: 80,292) The city of West Covina provides a subsidy ($20.00 per child per week) to lower-income parents for beforeand after-school care. It works, but the funds are limited, and we do have a waiting list. The need is great! **Contact:** Ms. Barbara Banks, 1444 W. Garvey Avenue, West Covina, California 91792.

Cape Coral, Florida (Population: 41,000) The city has licensed child care after school at local schools staffed by educators at very low cost and before school care at elementary schools at low cost. All programs are entirely self-sufficient financially. **Contact:** Mr. William Potter, Director Parks/Recreation, P.O. Box 150027, Cape Coral, Florida 33915.

Deerfield Beach, Florida (Population: 39,193) The N.E. Focal Point Senior Center has implemented an Intergenerational Child Care Center that cares for preschool-age children while their grandparents attend functions at the Senior Center. Minority grandparents now have access to services which previously had not been available. **Contact:** Ms. Nancy Reichenbach, 227 N.W. 2nd Street, Deerfield Beach, Florida 33441.

Hollywood, Florida (Population: 117,188) There is an afterschool or latchkey program at Driftwood Recreation Center, where we provide after-school care for 100 children at low cost. We also provide summer recreation programs for 150 children. **Contact:** Ms. Irene Devin, P.O. Box 22905, Hollywood, Florida 33022.

Jacksonville, Florida (Population: 540,898) The city in cooperation with Barnett Bank and the State Department of Health and Rehabilitative Services has developed a program to train mothers, who are on welfare, to operate family day care homes. These mothers are then provided child care slots under the city's Title XX Child Care Program so that they can run a family day care home. In this way, the mothers are able to get off the welfare rolls, and additional children are provided child care. The success of this program highlights the cooperation between the city government and the business community. **Contact:** Ms. Camilla Sims-Jones, Chief, Child Services, Room 402, 421 W. Church Street, Jacksonville, Florida 32202.

College Park, Georgia (Population: 24,632) The Recreation Department offers many child care programs at very reasonable rates. **Contact:** Mr. Eric Stipe, P.O. Box F, College Park, Georgia 30337.

Honolulu, Hawaii (Population: 762,874) The city constructed and contracted out our employer-sponsored child care center (The Early Education Center). It serves 260 children, ages 16 months to 5 years of age, including children who are not toilet trained. It operates 5 days per week, from 6:45 a.m. to 5:30 p.m. Breakfast, lunch, and a snack is served. The Center is the largest, and first public-employer sponsored,

child care center in the State. It is located adjacent to City Hall and the Honolulu Municipal Building. Parents are encouraged to have lunch with their children. **Contact:** Mr. Wayne Protheroe, 6th Floor, 650 South King Street, Honolulu, Hawaii 96813.

Moscow, Idaho (Population: 16,513) The city adopted a licensing requirement for day care facilities before state regulations were in effect. **Contact:** William A. Smith, P.O. Box 9203, Moscow, Idaho 83843.

Des Plaines, Illinois (Population: 55,319) The city has a subsidized day care program. **Contact:** Ms. Arlene Donahue, 1420 Miner Street, Des Plaines, Illinois 60016.

Schaumburg, Illinois (Population: 52,319) The Village of Schaumburg, in conjunction with three other community agencies (the school district, the park district, and the YMCA), developed and is implementing a low-cost, high-quality after-school program for "latchkey" kids. It serves 200 children from 10 schools at 5 sites. It has been successful both because we are meeting a need (low-cost child care), and because of the cooperative efforts of the 9 different groups. **Contact:** Ms. DuRee Bryant, Supervisor of Social Services, 217 S. Civic Drive, Schaumburg, Illinois 60193.

Bloomington, Indiana (Population: 51,646) The Day Care Resources Program was established to promote high-quality affordable child care. This program assists (1) the private sector in developing new day care facilities, (2) parents in finding appropriate child care, (3) employers in establishing new child care benefits for employees. **Contact:** Ms. Wendy Perry, Director Day Care Resources, P.O. Box 100, Bloomington, Indiana 47402.

Lebanon, Indiana (Population: 11,456) The Director of the Lebanon Department of Parks and Recreation and the Lebanon Park Board of Commissioners have been highly instrumental in establishing a youth advocacy council comprised of representatives from community youth-serving agencies which, in turn, now administer a school-age child care program in each of Lebanon's elementary schools. The Before and After School Experience (B.A.S.E) Program, having received two consecutive state grants, is now in its second year of operation serving 76 families on a sliding fee scale; five families have children in the program on scholarships. **Contact:** Ms. Andrea B. Linsmeyer, President of Youth Action Community Council, 310 N. Meridan Street, Lebanon, Indiana 46052.

Shreveport, Louisiana (Population: 205,815) The city, through the Mayor's Shreveport Women's Commission, initiated, organized, and found funding for the Youth Enrichment Program (YEP), an after-school day care program for children 5 to 13 years old. This program provides quality care, tutoring, and a wide array of arts, athletics, and community experiences at an affordable price. Some scholarships are available for children and families with low incomes. **Contact:** Ms. Judy Purgerson, Chief Administrative Officer, P.O. Box 31109, Shreveport, Louisiana 71130.

Bedford, Massachusetts (Population: 13,067) The city has a Before and After School Care Program for school-aged children; contracted service through Campfire, Inc. (National Program) **Contact:** Ms. Ruth Mathews, Camp Fire SACC, 1-5 Town Center, Mudge Way, Bedford, Massachusetts 01730-2138.

Somerville, Massachusetts (Population: 77,372) The Mayor's Office of Human Services hired a planner and organizer to begin developing an infant-toddler-parenting center for the major housing project. By encouraging tenants, and maintaining good relations with the Housing Authority, a site was found, and an operating agency was selected. Renovation monies were obtained as well as a grant to train infant-toddler teachers in a nontraditional setting. These were quickly followed by several foundation grants and a large national demonstration grant for one year of operation. **Contact:** Ms. Susan Rabinowitz, Director, Mayor's Office of Human Services, Room 208, 167 Holland Street, Somerville, Massachusetts 02144.

Ann Arbor, Michigan (Population: 107,969) The city funds child care scholarships. It has linked this program to economic development and the HUD "Project Self Sufficiency" Program to break the cycle of poverty. **Contact:** Merrill Neimoff, P.O. Box 8647, Ann Arbor, Michigan 48103.

St. Paul, Minnesota (Population: 270,230) The city is just beginning a child care initiative and is exploring the possibilities of a child care trust fund, a communitywide child care council, "Kidsday," a hot line, a change in personnel policies, etc. **Contact:** Ms. Christine Park, Child Care Coordinator, 545 City Hall, St. Paul, Minnesota 55102.

Nashua, New Hampshire (Population: 67,865) In the fall of 1987, the Mayor and the Board of Aldermen undertook the initiative to establish an Office for Child Care Services. The city of Nashua, New Hampshire was the first in the state to provide this service. Since then, the state of New Hampshire has established a position for a Child Care Services Coordinator.

The Coordinator encourages the development of child care sites through the relaxation of zoning restrictions. Also currently being discussed is the possibility of implementing the voucher system for city employees. **Contact:** Ms. Christine Lister, Child Care Services Coordinator, Community Services Division, 18 Mulberry Street, Nashua, New Hampshire 03060.

Old Bridge, New Jersey (Population: 51,515) The city started an after-school care program in January 1989. It is a new program that, at this point, is attracting new clients at a rate of 8 to 10 per week. **Contact:** Ms. Elizabeth A. English, Councilwoman, 1B Appletree Lane, Old Bridge, New Jersey 08857.

Saddle Brook, New Jersey (Population: 14,084) Through the combined cooperation of the Board of Education and the township, the community school runs a latchkey program in two of our elementary schools. We received a grant of $10,000 through CAP. **Contact:** Mr. Val Davitt, Director, Latchkey Program, Saddle Brook Community School, Mayhill Street, Saddle Brook, New Jersey.

Summit, New Jersey (Population: 21,071) The city's child care center is a model for other cities. **Contact:** The Honorable Janet Whitman, Mayor of the City of Summit, City Hall, Summit, New Jersey 07901.

Union City, New Jersey (Population: 55,593) The city has supported the development of a day care program that has gained national recognition and prominence. It is one of 700 accredited day care programs in the nation and has received a national award from the U.S. Conference of Mayors. Furthermore, this day care program has developed a national pilot program to train older workers as paraprofessional teachers' aides for child care centers, which addresses the crisis of an early childhood labor support shortage. **Contact:** Ms. Dana W. Berry, Director, Union City Day Care Program, Inc., 138 39th Street, Union City, New Jersey 07087.

Binghamton, New York (Population: 55,860) The city uses CDBG funds in various human service programs. Among these are child care organizations. Over the last 10 years, the city has allocated a portion of these funds to these agencies to serve low and very low-income city residents. **Contact:** Mr. Robert Sweet, City Hall, Binghamton, New York 13901.

Sylvania, Ohio (Population: 15,527) The city has a day care center operated by the Sylvania Community Services. This is a nonprofit agency that receives funding in part from the city. This program serves 200 children and is totally self-supporting. **Contact:** Mr. Gordon J. Kohler, Executive Director, Sylvania Community Services, 6850 Monroe Street, Sylvania, Ohio 43560.

Penn Hills, Pennsylvania (Population: 57,632) The city has excellent modern provisions in its local zoning ordinance which provide for and regulate family day care. **Contact:** Mr. Howard Davidson, Planning Director, 12245 Frankstown Road, Penn Hills, Pennsylvania 15235.

Corpus Christi, Texas (Population: 232,134) The goal of the Latchkey Program is to provide a safe, professionally supervised environment for latchkey children. The program, through a joint city and school system effort, educates latchkey children on basic survival skills necessary in today's society and provides quality recreational experiences. It enhances and develops the child's leisure skills, physical skills, coordination, and ability to express himself/herself through creative activities. **Contact:** Mr. Linda Hodge, Leisure Services Manager, Box 9277, Corpus Christi, Texas 78469-9277.

Farmers Branch, Texas (Population: 24,863) An after-school program is conducted at all four elementary schools in the city. Up to 40 students at each location are supervised in recreation activities between the end of school and 6 p.m. The program is popular and successful because it provides supervision during the time between school ending and the return of the parents. **Contact:** Ms. Tami Chastain, Box 819010, Farmers Branch, Texas 75381-9010.

San Antonio, Texas (Population: 785,940) The Day Home Accreditation Program is the only program of its kind in the nation where the city is the program operator. Over 100 homes have been accredited. It is also city-, state-, and corporate-funded. **Contact:** Ms. Dianne Quaglia, P.O. Box 839966, San Antonio, Texas 78283-3966.

Alexandria, Virginia (Population: 103,217) Approximately two years ago, the city of Alexandria made a commitment to provide beforeand after-school child care services for elementary school-age children. This was accomplished by providing city funds to establish centers in each of the city's public elementary schools. Today, each of the 12 schools provides before- and after-school child care to elementary school-age children. This was accomplished through leadership and support of the city's elected officials and City Manager. **Contact:** Ms. Jane Angrist, DHS, 2525 Mt. Vernon Avenue, Alexandria, Virginia 22301.

Fairfax, Virginia (Population: 19,390) The Recreation Department has greatly expanded the extended day segment of the summer day camp program. **Contact:** Mr. Mike Cadwallader, 3730 Old Lee Highway, Fairfax, Virginia 22030.

Hampton, Virginia (Population: 122,617) The city subsidizes two day care centers where the fee is based on the parents' ability to pay. The city also appropriates local funds for day care to meet the shortfall in social services' block grant funding, operates child care food programs through the U.S. Department of Agriculture, and participates in the state's fee system and the District of Columbia program for low-income working parents. **Contact:** Ms. Eunice Claude, 1320 Lasalle Avenue, Hampton, Virginia 23669.

Portsmouth, Virginia (Population: 104,577) In our city, day care has been provided to recipients of public assistance and to recipients of food stamps to enable those persons to seek employment, job training, or education. **Contact:** Mr. Melvin Twitty, Chief Social Work Supervisor, 1701 High Street, Portsmouth, Virginia 23704.

Olympia, Washington (Population: 27,477) The City Council appointed a Child Care Task Force in 1986 to address community child care concerns. The following have resulted fromtask force recommendations: (1) creation of a Child Care Action Council, (2) purchase of an enhanced resource and referral service for city employees, and (3) funding for a child care recruitment and referral program. **Contact:** Ms. Jan Gillingham, P.O. Box 1967, Olympia, Washington 98507.

Tacoma, Washington (Population: 158,501) In cooperation with licensed child care homes, Pierce County, the business community, the state of Washington, and child care advocates, the city has planned, developed, and implemented a countywide child care resource and referral service for parents seeking quality, affordable child care. In its first 12 months, it served over 3,000 families seeking care. Success is related to high employment-related demands (95 percent), diligent coordination of community resources, and successful pursuit of state, county, and other local fiscal resources. **Contact:** Mr. John Briehl, 747 Market Street, Tacoma, Washington 98402.

Huntington, West Virginia (Population: 63,684) The city's community center received a grant for two latchkey programs. From 3 p.m. to 10 p.m. each weekday, the center offers structured programming with proper supervision. The classes consist of piano lessons, Karate, foreign language, crafts, and tutoring. In addition, snacks and dinner are available for those who need it. **Contact:** Mr. Tom T. Hill, A. D. Center,, P.O. Box 1659, Huntington, West Virginia 25717.

Madison, Wisconsin (Population: 170,616) The Office of Community Services supports quality child care and education with a voluntary certification program backed up with grants, loans, consultation, and

training for participating centers and homes. Low-income child care assistance is tied to the use of certified care. **Contact:** Ms. Dorothy Conniff, P.O. Box 2627, Madison, Wisconsin 53701.

Health

West Hollywood, California (Population: 37,000) The city of West Hollywood, the state Office of AIDS, and the Los Angeles Free Clinic have organized Project ABLE (AIDS Beliefs Through Education), a youth theater troupe which presents AIDS educational programs to youth audiences and community groups. The members of the troupe are all young people who have gone through one of the Clinic's programs for high-risk youth and have expressed an interest in working with others to change at-risk behaviors. The troupe is trained in AIDS issues, communication skills, sensitivity to cultural issues, and education. **Contact:** Ms. Daphne Dennis, 8611 Santa Monica Boulevard, West Hollywood, California 90069.

Taylor, Michigan (Population: 77,568) A teen health/counseling center was established one year ago. Visitations to the center are well above projections. It was a highly controversial subject, but extensive surveying revealed need, and regular meetings with parents eased concerns. It was a cooperative effort of the city, the school district, a local hospital, parent groups, clergy, and students. The initial funding was supplied by the state of Michigan. **Contact:** Ms. Judy Cavell, Heritage Hospital, 24775 Haig, Taylor, Michigan 48180.

Minneapolis, Minnesota (Population: 370,951) The Minneapolis Adolescent Health Program (Minneapolis Public Schools) provides comprehensive health clinic services in all of the city's high schools. The program is managed by Minneapolis Public Schools, but it is a collaborative project of schools and city, county, and private agencies. **Contact:** Dr. Anne St. Germaine, Special Education Service Center, 254 Upton Avenue, Minneapolis, Minnesota 55405.

Vineland, New Jersey (Population: 53,753) Prenatal care is carried out at the local hospital for 500 individuals. In addition to all of the usual, required services, these women receive care from a team of nurse-midwives and physicians. Public health nurses and the hospital obstetric team meet every two months to discuss cases and care.

Well baby care is provided through a city health department clinic staffed by a well-respected pediatrician, several PHN's, and aides. Some are bilingual. The care is always state-of-the-art and innovative usually prior to being initiated elsewhere. **Contact:** Ms. Donna Lilla, Head Nurse (prenatal care), Newcomb Medical Center, 65 South State Street, Vineland, New Jersey 08360 **or:** Ms. Alice Hart (well-baby care), Director, Community Nursing Service, Sixth and Plum Streets, Vineland, New Jersey 08360.

Gloversville, New York (Population: 17,836) The Health department immunization clinic is free to the public. **Contact:** The Honorable Susan J. Hammond, Mayor of the City of Gloversville, 5 Frontage Road, Gloversville, New York 12078.

Akron, Ohio (Population: 237,177) The Maternal and Child Health Programs provide comprehensive quality medical care and services to families and children regardless of income; administer six well-baby clinics; provide immunizations; administer the WIC Program for the city and Summit County; provide lead-based paint poison control and treatment; provide services to high-risk families and children; work with public schools to promote healthy family life and intervention; provide orthopedic and neurological services to families and children with handicaps; and provide nursing services to teen mothers, children, and families. **Contact:** Mr. C. William Keck, M.D., Public Health Director, 177 S. Broadway, Akron, Ohio 44308.

Elyria, Ohio (Population: 57,504) With an Ohio Department of Health Child & Family Health Services grant, the city's health department operates a well-child clinic four days a week; a prenatal clinic five days

a week; an immunization clinic twice a month; and a dental clinic three times a month. The city contributes funds and in-kind (space, heat, light, etc.) to the program. **Contact:** Ms. Kathryn Boylan, 202 Chestnut Street, Elyria, Ohio 44035.

Girard, Ohio (Population: 12,517) The city provides, free of charge at this time, for well-baby immunization and a brief examination by a physician (the health commissioner) to any resident of Girard. It also provides for Hepatitis B immunizations to anyone in the health, police, and fire departments who wish it. There is also a flu vaccine program for seniors and immuno-compromised individuals, free of charge. **Contact:** Ms. Martha J. Runyan, RN, PHN, 100 West Main Street, Girard, Ohio 44420.

Lorain, Ohio (Population: 76,416) The health department has provided outreach services to a low-income neighborhood by working jointly with a neighborhood agency. The lack of public transportation restricts access for low-income people in obtaining medical care for children. **Contact:** Ms. Monica Wilkens, RN, 205 West 14th Street, Lorain, Ohio 44052.

Allentown, Pennsylvania (Population: 103,758) The city's health bureau administered antismoking campaigns to children and teens. It has also conducted awareness drives and "sting" operations to stop stores from selling cigarettes to minors. **Contact:** Mr. Gary Gurian, Director, Allentown Health Bureau, 723 Chew Street, Allentown, Pennsylvania 18102.

Lubbock, Texas (Population: 173,979) The city's health department provides prenatal and well-baby care for any Lubbock resident at a nominal charge or free to those who cannot pay. **Contact:** Ms. Mary Strang, RN, Lubbock Health Department, P.O. Box 2548, Lubbock, Texas 79408.

Port Arthur, Texas (Population: 61,195) The city offers an excellent WIC Program providing prenatal care and care for children and women. **Contact:** Dr. W. J. Berry, P.O. Box 1089, Port Arthur, Texas 77641.

Wichita Falls, Texas (Population: 94,201) The city's health department offers free clinics and classes that are extremely well-run and well received. It cooperates and works strongly with the North Texas Task Force on AIDS with educational programs and testing and offers nutrition classes for low-income people that are well-attended. The health department is doing a good job in trying to reach people in all these programs. **Contact:** Mr. Tom Edmondson, Box 1431, Wichita Falls, Texas 76307.

Milwaukee, Wisconsin (Population: 636,297) The Prenatal Education and Assessment Program (PEAP) in conjunction with the Milwaukee Public Schools offers comprehensive services to pregnant teens to improve the health status of mother and child, parenting skills, retention in school, etc. **Contact:** Ms. Liz Zelazek, 841 N. Broadway, Milwaukee, Wisconsin 53202.

Racine, Wisconsin (Population: 85,725) The city has a WIC program serving over 1,200 clients each month. **Contact:** Mr. Richard A. Wissell, Public Health Administrator, 730 Washington Avenue, Racine, Wisconsin 53403 .

Adolescent Pregnancy

New Orleans, Louisiana (Population: 557,927) The city created the Alliance for Human Services Teen Pregnancy Task Force to improve the quality of life of the city's adolescents by reducing, over a period of time, the occurrence of pregnancy among teen and preteens by encouraging the development of a value system which is consistent with the ideals of the family, church, and community.

New Orleans also joined other cities in launching a communitywide campaign to address the issues of responsible parenthood. This effort is called "Let's Talk," modeled after the successful Atlanta Let's Talk Campaign. The Let's Talk Campaign ran February through November. **Contact:** Ms. Almarie Ford, Director of Human Resources Policy & Planning, 1300 Perdido Street, New Orleans, Louisiana 70112.

New Bedford, Massachusetts (Population: 98,478) The city government has supported the Pregnant and Parenting Teen Coalition which is the model program used by the state to initiate programs in other cities. The coalition was formed 10 years ago to create common intake points and case management for teens. It

is successful because so many agencies and levels of government support it, and it delivers excellent services. **Contact:** Ms. Gloria Clark, Mayor's Assistant for Human Services, 133 William Street, New Bedford, Massachusetts 02740.

Niagara Falls, New York (Population: 71,384) The Center for Young Parents is an alternative for teenage mothers and offers them an alternative to finish their high school education. It offers parenting skills, prevention counseling, job skills training, as well as educational courses. It is a cooperative effort of the Youth Bureaus in this city as well as the county, the Board of Education, and the United Way. Major responsibility lies with the Board of Education. **Contact:** Ms. Grace Crowell, 24th Street & Independence Avenue, Niagara Falls, New York 14301.

Syracuse, New York (Population: 170,105) SMYLE Program is a mentor program which matches successful women in the community with teen girls at high risk of becoming pregnant. **Contact:** Ms. Charlotte Cohen, 17 Montgomery Street, Syracuse, New York 13202.

Yonkers, New York (Population: 195,351) The city has received a state grant and is presently implementing a program with 10 subagencies and the Bureau of Youth Services and Board of Education as lead agencies. The program provides case management, counseling, and education and will provide residence and infant day care. **Contact:** Ms. Julie Frauenfelder, Coordinator, 201 Palisade Avenue, Yonkers, New York 10703.

Spokane, Washington (Population: 171,300) The Teen Pregnancy Prevention Task Force has been successful in drawing a very diverse group of people together to discuss a very sensitive and often heated topic. By focusing on the ideas on which there is a consensus, they have been able to sponsor an annual conference for teens on sexuality. They have also produced an in-depth report on the status of teenage pregnancy in the community and identified the need areas. A community action plan is in the works. There is a broad base of support for this group as well as media involvement. **Contact:** Ms. Joanne Benham, City Hall 4th Floor, Spokane, Washington 99201-3333.

Housing

Bakersfield, California (Population: 105,611) The city (with county and social service agency support) worked to form a Homeless Task Force to address concerns on the growing number of homeless persons in the Bakersfield area. Its efforts resulted in the donation of the land to build a shelter, furniture and equipment donations, and governmental funding to construct the building itself. In addition, the local trade unions have volunteered both their time and materials to complete the shelter. The task force, various community organizations, and the city are continuing to support the shelter through contributions and fundraising activities. **Contact:** Mr. George Gonzales, 515 Truxtun Avenue, Bakersfield, California 93301.

Long Beach, California (Population: 361,355) The Cold Weather Emergency Shelter Program is designed to provide emergency food and shelter to homeless persons during severe weather. This program represents a unique collaboration of: the federal government, which provides funds through FEMA; the State of California, which has allowed National Guard facilities to be used as emergency shelters; Los Angeles County, which receives the FEMA funds and contracts with local agencies to administer the program; Catholic Charities, a local social service agency which provides the service through a contract with the county; and the city of Long Beach, which provides logistical support for the operation of the program. **Contact:** Mr. Michael Parker, Administrative Officer, P.O. Box 6157, Long Beach, California 90806.

Oceanside, California (Population: 76,698) Many farmworkers have been displaced in Oceanside by Health Department closing of substandard encampments. The local Housing Authority has offered Section 8 rent subsidies to families with children. **Contact:** Mr. Richard V. Goodman, 320 N. Horne Street, Oceanside, California 92054.

Tallahassee, Florida (Population: 81,548) Adequate low-cost housing has been a priority concern for low-income families for a number of years. As a result, the City Commission established a Housing Task

Force which made various recommendations on low-cost housing initiatives. From this, the City Commission has appropriated over 1.5 million dollars in city resources towards this effort. Additionally, the Commission has also established a nonprofit Housing Development Corporation which is in the process of constructing 18 single-family low-cost homes through public/private sector partnerships. Other successful initiatives include the construction of recreational and neighborhoodcommunity service centers, drug abuse prevention programs, summer job programs, and an emergency shelter for the homeless. **Contact:** Mr. George R. Manning, City Hall-300 S. Adams Street, Tallahassee, Florida 32301.

Tampa, Florida (Population: 271,577) The Tampa Coalition, as formed by mayoral selection, utilizes community members to solve the problem issues associated with the tenants of low-income housing. **Contact:** Mr. Otis Anthony, Executive Assistant to the Mayor, Room 8N, City Hall Plaza, Tampa, Florida 33602.

Boise, Idaho (Population: 102,451) The city funds 10 units (apartments of various sizes) and places homeless families with children there for up to two months rent free. The city also helps obtain day care, AFDC, Food Stamps, jobs, and permanent housing. **Contact:** Toni Jones, El-Ada, 1191 Grand Avenue, Boise, Idaho 83702.

Champaign, Illinois (Population: 50,267) The city has a house moving program that provides homes for families of low or moderate incomes. The city acquires a rehabilitable house in trade for a portion of a public alley of no use to the city. The house is moved to a city-owned lot, rehabilitated, and sold to a family of low to moderate income.

A council member noticed a renovatable single-family-sized structure which was about to be demolished to make space for a large apartment complex and suggested that the Community Development Office try to obtain the house at no cost and move it to a city-owned lot for rehabilitation and disposition. Inspired by the proposal, the Community Development Director contacted the major developers and requested that houses slated for demolition be donated to the city for rehabilitation and disposition to families of low to moderate incomes.

A total of ten houses have been moved and renovated. One was sold to the Women's Emergency Shelter. The house moving program as a whole recently won an award for Region 5 of the United States Department of Housing and Urban Development.

The city has also helped the homeless through grants and many other ways in the past. **Contact:** Mayor Dannell McCollum, 102 N. Neil Street, Champaign, Illinois 61820.

Council Bluffs, Iowa (Population: 56,449) In 1987, the Micah House was opened for homeless families. Much of the contribution necessary to open the facility came with the help of city and federal monies generated through the city. A lot of staff time was spent in grants, planning, and rehabilitation assistance. The shelter is now in its second year, and new proposals for expansion of the facility and essential services are being reviewed for funding. **Contact:** Mr. Patrick J. Hall, 227 South 6th Street, Council Bluffs, Iowa 51501.

Louisville, Kentucky (Population: 298,694) The city of Louisville played a major role in creating the Coalition for the Homeless in 1985 basically to synergize those community-based organizations that assist the homeless and to begin to deal with the homeless population in a comprehensive manner. The Coalition for the Homeless created several subcommittees, two of which (the Homeless Families Committee and the Shelter Providers Committee) have been extremely active in the gathering of data and statistics. Their findings revealed that our community needed to develop more transitional housing and services in order to make families economically self-sufficient. The city of Louisville responded immediately by providing $500,000 which has been used as matching money for the Stewart B. McKinney Act. Presently, we have received over $6,000,000. Through this cooperative spirit, we are accomplishing the ultimate in the number of units and services now provided for the homeless of our community. **Contact:** Ms. Mary Margaret Mulvihill, Deputy Director, Office of Human Services, Suite 700, 515 W. Market Street, Louisville, Kentucky 40202.

Cambridge, Massachusetts (Population: 95,332) Cambridge has an Emergency Shelter Program coordinated through the Human Services Department. **Contact:** Phil Mangano, Department of Human Services, 51 Inman Street, Cambridge, Massachusetts 02139.

Lawrence, Massachusetts (Population: 63,175) Home ownership has been a major priority for our current administration. Pre-home ownership clubs have been established for families able to pay monthly mortgage rates (annual income maximum is $30,000). The clubs provide counseling and workshops regarding buying a home, real estate market, etc. Participants are required to save a portion of their income, and down payment assistance is available. This is a public-private partnership among the city, the state, and the business and banking communities. **Contact:** Mr. Owen Cardwell, Planning & Community Development Department, 225 Essex Street, 3rd Floor, Lawrence, Massachusetts 01840.

Grand Rapids, Michigan (Population: 181,843) The Reconstruction for Lease/Purchase Program is a program which provides substantially rehabilitated homes to lower-income families for no down payment. The program benefits predominantly working poor, minorities, and families with children. **Contact:** Ms. Elizabeth Byron, Room 420, City Hall, Grand Rapids, Michigan 49503.

Tupelo, Mississippi (Population: 23,905) The city has secured over $110,000 in federal funds for three local emergency shelters. These funds were used for operation and maintenance as well as facility improvements. This includes a shelter for abused and neglected children, a shelter for homeless girls, and a shelter for abused women and their children. Because of the media coverage regarding the awarding of these funds, other individuals have become aware of the shelters and offered assistance with donations, monetary and otherwise. **Contact:** Mr. Michael C. Ward, Development Officer, P.O. Box 1485, Tupelo, Mississippi 38802-1485.

Springfield, Missouri (Population: 133,116) The city has had workshops and conferences held within community. It has an ongoing rehabilitation assistance program for home owners and lower-income tenant-occupied properties, and it has strengthened the code requirements on rental properties. **Contact:** Mr. John Petersen, 316 E. Central, Springfield, Missouri 65801.

St. Louis, Missouri (Population: 452,801) The city's Homeless Services Network has been recognized by the Harvard/Ford Foundation Innovations Program. **Contact:** Mr. Frank Hamsher, Counsel to the Mayor, City Hall, Tucker and Market Streets, St. Louis, Missouri 63103.

Middletown Township, New Jersey (Population: 62,574) The city's ongoing low- and moderate-income housing rehabilitation program is meeting with great success. **Contact:** Mrs. Ruth Christianbury, Town Hall, Middletown, New Jersey 07748.

New York, New York (Population: 7,071,030) The Lend-A-Hand Program, now officially known as the Intensive Casework Unit, was initiated in September 1986 in response to recognition by Adult Services that apartments renovated by HPD were being lost to the homeless families for whom they were intended due to the length of time between signing a lease and the actual occupancy by the family. At the time the program was implemented, up to two months would commonly elapse between the time the apartment was finished by HPD and the family moved in. During that time, many apartments were inhabited by squatters or vandalized to the point of becoming uninhabitable once more.

Introduced in 1987 as an HRA legislative proposal, the program was enacted into law in 1987.

The Division of Rehousing within Adult Services found that the delay in moving in was usually due to problems such as the family's lack of furniture, lack of funds for utility deposits, unfamiliarity with how to get utilities connected, or lack of knowledge of their rights and responsibilities as tenants. The Lend-A-Hand Program assigns each family a worker to specifically assist them with such problems and helps them with furniture and arranging utility connections. As a result, relocation time has dropped from over two months per family to less than a week.

After a family moves into the apartment, a caseworker from HRA's Office of Family Services contacts the family to help them through the transitional period and increase the likelihood that a family will be

successful in maintaining an independent existence.

During the 10 months of FY 87 that the Intensive Casework Unit was operational, the program expedited the movement of 1,015 families from hotels into permanent housing. In FY 88, the Intensive Casework Unit helped 1,899 families move into permanent housing. As of October 31, 1988, 817 families have been assisted in FY 89.

In addition to the tremendous benefit each family receives from an early exit from the trying conditions of homelessness, substantial cost savings are realized. The cost of relocation assistance for each family is approximately $2,000, as compared to the average cost $2,000 per month to house families in hotels. **Contact:** Reg Foster, Deputy Administrator, Human Resources Administration, 250 Church Street, New York, New York 10013.

Dayton, Ohio (Population: 193,536) The city of Dayton is an active participant in planning, developing, and implementing services for the homeless. It created a task force and provided an unused fire station for conversion into a shelter. The city also helped in the creation of a policy body to address this community issue, provided some start-up funds, and currently serves as a pass-through for federal dollars. The city actively collaborates with other primary care providers, religious groups, and the private sector. **Contact:** Mr. Charles R. Meadows, 101 West Third Street, Dayton, Ohio 45402.

Lawton, Oklahoma (Population: 80,054) CDBG funds were used to purchase a structure as a shelter for the homeless that did not have operational funding. **Contact:** C. Carter Crane Shelter, 12 N.W. 36th Street, Lawton, Oklahoma 73501.

Altoona, Pennsylvania (Population: 56,078) The city funded the purchase by a local nonprofit family and children's service agency of a vacant apartment and adjoining building for renovation into low-income housing and a day care center for single-parent families. The project involves multiple social services and job training agencies. **Contact:** Ms. Jacqueline Sutton, Family & Children's Service2022 Broad Avenue, Altoona, Pennsylvania 16602.

Bristol Township, Pennsylvania (Population: 58,733) The township is cognizant of the problems affecting those without suitable housing. Our community is working with county agencies on the construction of a homeless shelter. The township has agreed to provide technical assistance and necessary public action in the form of rezoning of property for the construction of a homeless shelter. Recently, the township and the county applied for funding from the Commonwealth of Pennsylvania, and a grant in the amount of $150,000 has been awarded for the homeless shelter to be constructed on county-owned land in the Bristol Township. The township is cooperating fully and expects that the homeless shelter will be in operation in late 1989. **Contact:** Ms. Edna M. Roth, Township Executive, 2501 Oxford Valley Road, Levittown, Pennsylvania 19057.

Cranston, Rhode Island (Population: 71,992) St. Matthew's Rectory was converted into low-income housing by CCAP/CDTI and has been supported by the city. **Contact:** Ms. JoAnne Pandozzi, Executive Director, CCAP, 41 Heath Avenue, Cranston, Rhode Island 02905.

Denton, Texas (Population: 48,063) The city currently has the Low/Moderate Income Housing Task Force investigating housing problems. The task force will eventually advise City Council on solutions/strategies to deal with the problem. Its successfulness has yet to be determined. **Contact:** Ms. Barbara Ross, Community Development Coordinator, 110 B. West Oak, Denton, Texas 76201.

Casper, Wyoming (Population: 51,016) The city of Casper's emergency repair and owner-occupied housing rehabilitation program provides either grant money or low-interest loans for income eligible recipients in the city. Through this program, the City has assisted over 200 home owners in bringing their dwellings to code and Section 8 standards. These lowand moderate-income home owners would not have been able to rehabilitate their dwellings because they would not qualify for private funding. **Contact:** Mr. Dennis Royal, 200 North Center Street, Casper, Wyoming 82601.

Family Violence

Albany, Georgia (Population: 74,425) The city adopted a "Latchkey" Program to prevent child abuse of children from single-parent households. **Contact:** Mayor William Bays, P.O. Box 447, Albany, Georgia 31703.

Hanover Park, Illinois (Population: 28,719) The village has donated a building to house the "Children's Advocacy Center" for the Combined Investigation Project. It provides interviewing space for sexual abuse victims (children) coordinating with DCFS, the police department, and the Office of the State's Attorney. This was a grass-roots project originating from community leaders and gaining community support. **Contact:** Ms. Pamala Klein, Children's Advocacy Center, 2121 W. Lake Street, Hanover Park, Illinois 60103.

Fort Wayne, Indiana (Population: 172,391) The Victim Assistance Program of the Fort Wayne Police Department regularly contacts victims of spousal abuse as identified on police reports and offers available information about the criminal justice and social service systems. In addition, we collaborate with the prosecutor's office when charges are filed so that women/men are adequately prepared to press charges and testify. We also network with the local Women's Shelter, the Rape Crisis Program, and Men for Nonviolence in addressing the issue of spouse abuse. The success of the program is demonstrated by the victims' ability to make informed decisions on prosecuting and being less likely to try to drop the charges. **Contact:** Ms. Patricia Smallwood, City County Building, Fort Wayne, Indiana 46802.

Westwood, Massachusetts (Population: 13,212) A presentation on child sexual abuse has been performed by high-school volunteers for all second- and third-grade students, faculty, staff, and parents. **Contact:** Mr. Robert Stadolnik, Director of Youth Services, 580 High Street Westwood, Massachusetts.

Omaha, Nebraska (Population: 342,795) The city of Omaha has provided some funding to the Omaha YWCA's Women Against Violence Program, which provides a hot line, counseling, and assistance to abuse victims. The current funding provided by the city is $42,000 for 1989. It is successful because the YWCA administers and handles the program in a very professional manner. **Contact:** Ms. Emily C. Kozlik, YWCA Director, 222 South 29th Street, Omaha, Nebraska 68131.

Bartlesville, Oklahoma (Population: 34,568) The Child Protection Team handles abuse and neglect cases. A wide range of local professionals provide a more varied input to the solution of a problem connected with a particular case. Meetings are held on a monthly basis to discuss any problems. **Contact:** Ms. Edith Turner, 700 South Penn, Bartlesville, Oklahoma 74003.

Baytown, Texas (Population: 56,923) The Bay Area Women's Center supports battered women and children. Is a volunteer program funded with private, local, and state funds. **Contact:** Ms. Becky Jasso, Bay Area Women's Center, P.O. Box 3735, Baytown, Texas 77522.

Galveston, Texas (Population: 62,902) As mayor, I am involved in a small task force on sexual abuse in children focusing on the hospital having a regular experienced intake unit with pediatricians and residents who can testify as professional witnesses in court cases. The District Attorney, hospital personnel, welfare personnel, and the police department are all part of the project. **Contact:** The Honorable Janice Coggeshall, Mayor of the City of Galveston, City Hall, P.O. Box 779, Galveston, Texas 77551.

Kerrville, Texas (Population: 15,276) The Hill Country Crisis Council is a nonprofit organization providing crisis intervention, support, emergency shelter, referral, and legal advocacy services to victims of domestic violence and sexual assault. The city contracts with this organization to provide the services. Other local government entities also participate. **Contact:** Mr. Gary Crozier, President, Hill Country Crisis Council, 7000 Earl Garrett, Kerrville, Texas 78028.

Bellevue, Washington (Population: 73,903) City and local agencies work together on a program of deferred prosecution for domestic violence offenders who agree to seek treatment. The program has a good success rate and results in sure and predictable intervention by the police department, the courts, and counseling agencies. **Contact:** Mr. Robert Beem, Principal Planner, P.O. Box 90012, Bellevue, Washington 98009-9012.

Juvenile Justice

Anchorage, Alaska (Population: 173,017) In February 1986, Mayor Knowles established a Runaway and Homeless Youth Task Force (RHYTF) to identify the types and causes of problems experienced by runaway and homeless youth in Anchorage. The RHYTF was also asked to develop recommendations that would improve the service system to runaway and homeless youth. The task force (all volunteers) consisted of 25 members representing municipal and state policymakers, Health and Social Services Commissioners, social service providers, private industry representatives, parent groups, and others. **Contact:** Ms. Jewel Jones, Social Services Manager, P.O. Box 196650, Anchorage, Alaska 99519-6650.

Mesa, Arizona (Population: 152,453) The city has provided funding since 1978 to the local YMCA to offer a diversion program to juvenile status offenders. The recidivism rate after a one-year post-program is 4 percent compared to that of 40 percent for juveniles committing the same crimes but not going through the program. **Contact:** Mr. Wendell Sparks, Associate Executive Director, Mesa Family YMCA, 207 N. Mesa Drive, Mesa, Arizona 85201.

Anaheim, California (Population: 219,494) Project Save-A-Youth (SAY) is a partnership between the city of Anaheim, the Anaheim Boys and Girls Club, the YMCA, and the Turning Point Family Services. The city contracts with these organizations to provide four full-time youth outreach workers, recreational programs, and an annual summer camp experience. It is successful because of a holistic approach to deal with at-risk youth. **Contact:** Mr. Steve Swaim, 200 So. Anaheim Boulevard, Anaheim, California 92805.

Vallejo, California (Population: 80,188) The city supports a teen counseling group called Youth and Family Services. Support is direct financial assistance and free rent of a city-owned house near the police department. The police department and Youth and Family Services work closely together to counsel "nonserious crime" youth offenders by keeping these children out of the Juvenile Justice System. Local judges also cooperate in this program. Youth and families are counseled, restitution is frequently made, and service work is performed. The program is successful. **Contact:** Sgt. Tony Pearsall, Vallejo Police Department, 111 Amador Street, Vallejo, California 94590.

Sterling, Colorado (Population: 11,385) The Youth Services Department works primarily with young people who have been referred by schools, the police department, the courts, and the sheriff's department providing counseling help and in obtaining restitution. **Contact:** Ms. Virgie Nelson, Youth Specialist, 201 South 4th, Sterling, Colorado 80751.

Miami, Florida (Population: 346,931) The Metro Dade Department of Youth and Family Development provides a wide range of social and psychological services to families either at risk of having their children involved in the juvenile justice system or already in the system. Its accessibility through outreach offices throughout the county and its philosophy of outreach and total family involvement contribute to its success. **Contact:** Mr. James J. Mooney, 1701 NW 30th Avenue, Miami, Florida.

Decatur, Illinois (Population: 93,939) The city assigns a council person to serve on an ad hoc committee of several service provider agencies to combat gang activities. **Contact:** Ms. Caroyln Burler, 3789 N. Water, Decatur, Illinois 62526.

Elgin, Illinois (Population: 63,668) A serious effort has been made to identify gang activity, deal with the problems, and provide alternatives. **Contact:** Chief Robert Baird, Elgin Police Department, 150 Dexter Court, Elgin, Illinois 60120.

Joliet, Illinois (Population: 77,956) The Search and Officer Friendly Programs offer one-on-one contact with children which allows them to see police officers in a different light than would otherwise occur. **Contact:** Officer Randy Fleck, 150 W. Jefferson Street, Joliet, Illinois 60431.

Lansing, Michigan (Population: 130,414) The city has created a Youth Information Line in the Human Resources Department, staffed by one of the employees, from which parents, youth, and professionals also may receive information, referral, and counseling services. The police make direct referrals to this staff person for all status offenders. Additionally, the city created a program for high-risk adolescents and contracted with the Ingham County Health Department's adolescent center to operate the program through the Human Resources Department. **Contact:** Ms. Jacqueline Warr, Director of Human Resources Department, Third Floor, 119 N. Washington Square, Lansing, Michigan 48933.

Livonia, Michigan (Population: 104,814) The Livonia Youth Assistance Program is a delinquency prevention program for youth 7-16. The diversion program is targeted toward youths and their families. It offers a treatment plan which includes a behavior contract, weekly meeting with a volunteer mentor, community service work, and personal classes for youths. Parents must participate in an effective Parenting Skills group. Eighty percent of the youth do not have further police contact. **Contact:** Ms. Sue Wisler, Community Resources Department, 33000 Civil Center Drive, Livonia, Michigan 48154.

Columbus, Ohio (Population: 565,032) The Exploited Children's Unit, a cosponsored program by County Children Services and the Columbus Division of Police, investigates runaways and other youth exploitment activities. A national linkage has been established with other agencies to assist in searches and investigations. **Contact:** Lt. Richard Higgins, Exploited Children's Unit, 120 West Gay Street, Columbus, Ohio 43215.

University Heights, Ohio (Population: 15,401) The University Heights Youth Services Bureau has successfully provided counseling to youth who have committed offenses in lieu of sending them to Juvenile Court. This service has enabled several young people the opportunity to correct their behavior early in their lives through education and explanations. Parents are often the last to know what their children are doing. When they do become aware, they are upset and confused as to what they should do. Through this program, the parents and the children are provided guidance both individually and within the family structure. **Contact:** Lt. Edward J. Schmidt, 2304 Warrensville Cnt. Rd., University Heights, Ohio 44118.

Tulsa, Oklahoma (Population: 360,919) In Tulsa, telephones are being placed in low-income housing units so that residents can have access to 911 (emergency), call other residents, and report criminal activity. **Contact:** Chief Drew Diamond, 200 Civic Center, Tulsa, Oklahoma 74103.

Harrisburg, Pennsylvania (Population: 53,264) the city's juvenile fire-setter program has been very successful in preventing future repeat behavior. **Contact:** Mr. Michael Bownaze, Assistant Fire Chief, 123 Walnut Street, Harrisburg, Pennsylvania 17101.

State College, Pennsylvania (Population: 36,130) State College has assisted a nonprofit agency which operates a shelter for runaway and abused children. This shelter is open 24 hours a day, 365 days a year. In addition to sleeping quarters for up to six youth, the shelter operates a 24-hour-a-day emergency hot line and family and youth counseling services. **Contact:** Mr. Carl R. Hess, Community Development Director, 118 South Fraser Street, State College, Pennsylvania 16801.

Chattanooga, Tennessee (Population: 169,728) Chattanooga has a citywide task force to address the problem of gangs and other teenage problems. The task force was organized through a coordinated community effort called VENTURE. **Contact:** Dr. Bill Butterfield, University of Tennessee at Chattanooga, 615 McCallie Avenue, Chattanooga, Tennessee 37403.

El Paso, Texas (Population: 425,259) The Gang Intervention Program provides tutoring services, group counseling, guidance, and negotiation to alleviate gang tension and activities. This program is effective

due to the "street work" and the work done in areas where gangs are prevalent. **Contact:** Mr. John Estrada, #2 Civic Center Plaza, El Paso, Texas 79901-1196.

Plano, Texas (Population: 72,331) Neighborhood Youth Services is a community supported agency that provides a wide range of services including, Community Enrichment Programs, Counseling Services, and Special Assistance. All programs are provided either at no charge or on a sliding scale based on the ability of the client family to pay for the services. **Contact:** Ms. Anne Carlson, Director, Neighborhood Youth Services, P.O. Box 860358, Plano, Texas 75086-0358.

West Valley City, Utah (Population: 72,511) The Resource Officer Program is a diversion program targeted toward first offenders. **Contact:** Mr. Richard Sweeney, 2470 S. Redwood Road, West Valley City, Utah 84119.

Norfolk, Virginia (Population: 266,979) The Task Force on Alternatives to Incarceration has developed a major report identifying issues and making recommendations to the City Council on foster care, group home, and detention center needs and on children in need of supervision. Its success is due to its partnership between citizens and professionals with leadership from a city councilman (G. Conoly Phillips). **Contact:** Mr. Stephen Blair, Project Coordinator, City Hall Room 302, Norfolk, Virginia 23501.

Recreation

Huntsville, Alabama (Population: 142,513) The city has constructed neighborhood community centers throughout the low-income areas. A wide range of recreational activities are available at the centers. In addition, the city provides space for social agencies. Planned Parenthood is located in one of the centers, and there are health clinics located in several of the centers. **Contact:** Mr. Ken Gipson, 125 Earl Street, Huntsville, Alabama 35805.

Springdale, Arkansas (Population: 23,458) The city is currently constructing a 75-acre sports complex and park with 10 ball fields, 5 soccer fields, 6 tennis courts, and a 17-acre family recreation area. The primary reason for the success of the complex has been the involvement of local citizens and civic groups. **Contact:** The Honorable Charles N. McKinney, Mayor of Springdale, 201 N. Spring Street, Springdale, Arkansas 72764.

Baldwin Park, California (Population: 50,554) The city deals with 30 of the survey topics at a community center that also houses a private nonprofit corporation that delivers services in exchange for space, utilities, and an executive staff on loan. **Contact:** Mr. Lee Lucas, Director of Human Services, 14403 Pacific Avenue, Baldwin Park, California 91706.

Fontana, California (Population: 36,804) The city's recreation department has been very successful in implementing preschool education and school-age child care. The programs are affordable and maintain a high quality. The day care (Kids Co.) is state-licensed. The other latchkey programs offered at the schools are in conjunction with the school district. **Contact:** Ms. Sharron Blake, Day Care Director, 17004 Arrow Boulevard, Fontana, California 92335.

Pomona, California (Population: 117,000) Goblin Giveaway Contest gives the children of Pomona an alternative to trick or treating on Halloween night. All children look forward to Halloween and trick or treating, but the streets are unsafe for young children, thus the creation of the Goblin Giveaway.

The Pomona Kiwanis Club and the Parks and Recreation Department cosponsor the annual event. The Kiwanis Club donates the money for the prizes and provides manpower to augment the recreation division staff on Halloween night.Elementary-aged children are encouraged to return their entry blanks to the Goblin Giveway contest. Children only win when their entry blank is drawn and they are home to take the phone call. Sixty percent of the eligible children entered the contest. Thus 7,000 children who would normally be on the streets are safely at home waiting to see if they receive a phone call from the friendly goblin. **Contact:** Ms. Sherri Schmid, P.O. Box 660, Pomona, California 91769.

Ridgecrest, California (Population: 15,929) The city is in the process of building a community center and gym and new city hall with redevelopment money. The city has relied and co-used the Naval Weapons Center Facility on base. Next year at this time, the city will have its own facility to take care of its recreation needs. The city is looking forward to this new asset to the community. **Contact:** Mr. Bill Bersie, 231 Station Street, Ridgecrest, California 93555.

San Gabriel, California (Population: 30,072) The city runs programs for youth at all the public schools in the city. The year-round program is offered during the school year from 3-5 p.m. and during the summer vacation time from 9 a.m.-4 p.m. The program includes sports, games, arts and craft activities, special events, and excursions. **Contact:** Mr. George Kotchnik, 250 S. Mission Drive, San Gabriel, California 91776.

Daytona Beach, Florida (Population: 54,176) The city has an "After School Program" which runs from the time school is out until 5:30 p.m. Recreational activities are provided. This is a free supervision for otherwise unsupervised children. Each facility averages 50 children. Summer programs operate all day. Two facilities are located on school premises. This program is highly successful due to need. **Contact:** Ms. Ginger Shaddix, Deputy Director, Parks and Recreation, 108 E. Orange Avenue, Daytona Beach, Florida 32014.

Fort Myers, Florida (Population: 36,638) The city has strategically located family and neighborhood parks and playgrounds and anticipate additional facilities in the very near future. **Contact:** Mr. John Kremski, P.O. Box 2217, Fort Myers, Florida 39902.

St. Petersburg, Florida (Population: 236,893) The city has specially designed programs and activities for summers, holidays, and after school. Availability, variety, and level and expertise of staff involvement contribute to success. **Contact:** Ms. Sherry McBee, 1450-16th Street, North St. Petersburg, Florida 33704.

West Palm Beach, Florida (Population: 62,530) The city's Leisure Services Department has enacted a "Master Plan" to provide access to recreational activities to citizens of all ages from the Pixie Program for toddlers to field trips for the elderly. **Contact:** Mr. Vincent Kendricks, P.O. Box 3366, West Palm Beach, Florida 33407.

Fairview Heights, Illinois (Population: 12,414) The city sponsors a comprehensive Recreation and Park Program. **Contact:** Mr. Roger Grelle, 10025 Bunkum Road, Fairview Heights, Illinois.

Matteson, Illinois (Population: 10,223) The Community Center provides programs for youth and continues to provide additional activities for youth ages 1 year to 18 years old. **Contact:** Mr. Jim Sharp, Director of Parks and Recreation, 4450 Oakwood, Matteson, Illinois 60443.

Waukegan, Illinois (Population: 67,653) The city has a youth community center for teens. **Contact:** Alderman Haig Paravonion, 106 N. Utica, Waukegan, Illinois 60085.

Waterloo, Iowa (Population: 75,985) The city offers outstanding recreation (both sports and arts) for children. **Contact:** Mr. Dean Myhr, Director, Waterloo Recreation Commission, Box 1435, Waterloo, Iowa 50704.

Winfield, Kansas (Population: 10,736) The city has not completed any projects, but it is currently working on a community/recreation facility for youth. At the present time, there is no real "gathering" place for the youth of the city. **Contact:** Mr. Richard Cotton, City Manager, P.O. Box 646, Winfield, Kansas 67156.

Lowell, Massachusetts (Population: 92,418) The Summer Youth Recreation Program is a citywide program for children of all ages. **Contact:** Ms. Pat McCoy, Parks and Recreation Department, J.F.K. Civil Center, Lowell, Massachusetts 08152.

Flint, Michigan (Population: 159,611) Every summer, the city sponsors events known as Family Fun Days. These are events at which children of all ages come to play all sorts of games. Hot dogs and soft drinks are provided. These are usually all-day events and are held on Saturdays. **Contact:** Mr. James N. Makokha, Director, Parks and Recreation, City of Flint, Room 301, 1101 S. Saginaw Street, Flint, Michigan 48502.

Oak Park, Michigan (Population: 31,537) The Oak Park Youth Assistance sponsors a monthly Gym and Swim Program for high school and middle school students at Oak Park High School. The Oak Park Youth Assistance provides adult supervisors and hires and pays the lifeguards. This event occurs the second Friday of each month in the evening and has drawn between 75 to 125 young people per event. **Contact:** Mr. Paul Scobie, Youth Assistance, 14300 Oak Park Boulevard, Oak Park, Michigan 48237.

Saginaw, Michigan (Population: 77,508) Out of all the items listed on the survey, recreation is the only area where the city is a provider. The city has a beautiful park system, several recreation centers, and a recreation staff that is professional. The programs include passive and active recreational activities. Some are supported by user fees, but most are free. The programs are for people of all ages. The Recreation Department works with the School Board on joint programs. **Contact:** Mr. Hurley Coleman, 1315 So. Washington, Saginaw, Michigan 48601.

Biloxi, Mississippi (Population: 49,311) The Summer Playground and Enrichment Program is a part of the Department of Parks, Recreation and Cultural Affairs' (PRCA) broad range of innovative leisure activities for the citizens of Biloxi. The program supports the ongoing goal of this agency to provide recreational activities that can impact the quality of life for all citizens in the city of Biloxi and have been determined to fill a need for a targeted group within the community. The goal of PRCA is also to initiate programs that will be affordable for the low-income family and that will enrich the lives of the participants. **Contact:** Mrs. Scottie Maddox, Coordinator of Services, P.O. Box 775, Biloxi, Mississippi 39533.

Hazelwood, Missouri (Population: 13,098) The city is currently constructing a Civic Center which will complement its Community Center. These two facilities will make recreational facilities more convenient to youth because now there is such a facility at each end of town. In addition to being geographically convenient, the two centers will allow for more programs, a better selection of facilities to use, and less crowding. **Contact:** Ms. Darlene Harrison, 1186 Teson Road, Hazelwood, Missouri.

Billings, Montana (Population: 66,842) The Parks and Recreation Department sponsors an extensive summer activities program. **Contact:** Mr. Joe Fedin, P.O. Box 1178, Billings, Montana 59103.

Las Vegas, Nevada (Population: 164,674) The city, in conjunction with the Clark County School District, has established community centers at various school sites throughout the City offering children recreational programs after school and in the evenings. The centers are also utilized by the community at-large. The centers offer a wide range of workshops, classes, and special events (e.g., dances, parties, and contests). **Contact:** Mr. Chris Stanfill, Director, Department of Parks & Leisure Activities, 749 Veteran's Memorial Drive, Las Vegas, Nevada 89101.

Jersey City, New Jersey (Population: 223,532) Camp Sunshine is a FREE summer recreational program for handicapped youth residing in Jersey City. The camp serves youth between the ages of 5 and 21. The program is in operation for seven weeks during July through August. The primary purpose of the camp is to provide special-needs persons the same opportunities for recreation and leisure activities as nonhandicapped persons.

The program is successful because of the dedicated staff (many are certified teachers), and free transportation makes it available to people who would not be able to participate otherwise. **Contact:** Ms. Darice Toon Bell, 201 Cornelison Avenue, Jersey City, New Jersey 07304.

Trenton, New Jersey (Population: 92,124) The city sponsors the Mini Olympics held at Trenton Central High School. It includes track and field events. Eighteen public schools, 10 parochial elementary schools, and a number of private organization were involved. The staffing consisted of 36 coaches and 20 youth assistants. Prizes were awarded to winners from first to sixth place, and certificates were given to all participants. There was a total of 2,500 participants representing different ethnic backgrounds. **Contact:** Ms. Ethel Jones, 319 E. State Street, Trenton, New Jersey 08608.

Albany, New York (Population: 101,727) The city of Albany has numerous park facilities, teen centers, and recreational programs heavily used by youngsters throughout the area. The city is convinced that the

level of activity has helped families considerably. It intends to continue to create and develop new programs and initiatives in this area.

The city has initiated a program called "The Albany Plan" to provide summer jobs for youth to help combat the drug problem. **Contact:** Commissioner Richard J. Barrett, Parks Department, 7 Hoffman Avenue, Albany, New York 12209.

Fredonia, New York (Population: 11,126) The Fredonia-Pomfiet Youth Council was established over 40 years ago to provide for the recreation needs of the community. Under the direction of highly-qualified personnel, over 5,000 youth benefited from a variety of instructional and recreational activities during the year. **Contact:** Mr. David Giambrone, Parks and Recreation Director, P.O. Box 31, Fredonia, New York 14013.

New Rochelle, New York (Population: 70,794) The city offers a wide range of recreational opportunities for all ages. A resident serious about a sport can participate in one of the many leagues while others can enjoy art, music, drama, and other recreational opportunities at excellent public facilities. **Contact:** Mr. James E. Arles, Commissioner of Human Services, City Hall, New Rochelle, New York 10801.

Oswego, New York (Population: 19,793) The mayor has an Advisory Council on Youth and Families. One of the subcommittees of this council is a group called "Park It In Oswego," which is raising funds for a playground that will be planned and built by the community. **Contact:** Ms. Deborah Doran, 8 Whitetail Circle, Oswego, New York 13126.

Fostoria, Ohio (Population: 15,743) The city officials, in cooperation with the county parks and recreation commission, have recently completed a boat ramp at a city reservoir, thus enhancing a public facility for recreational use. **Contact:** The Honorable Kenneth Beier, Mayor, City of Fostoria, 213 South Main Street, Fostoria, Ohio 44830.

Kettering, Ohio (Population: 61,186) Kettering provides a Tot-Lot Program which is an affordable preschool program for three- to five-year-olds. This is a state-licensed early childhood learning program emphasizing creative, social, and emotional growth in a recreational setting. Art, music, language, science, and sensory motor skill activities are included.

Kettering also provided a highly successful program for youth during their Christmas vacations from school. A structured program with swimming, skating, crafts, etc., provided child care for working parents who would have had to make other arrangements for their children during Christmas vacation. **Contact:** Ms. Cathy DeRamus, 3600 Shrayer Road, Kettering, Ohio 45429.

Parma, Ohio (Population: 92,548) The Parma Public Schools and the Division of Parks and Recreation work together to provide recreational facilities and summer and winter programs for all ages, for individuals, and for families., During the winter months, there is free ice-skating, cross-county skiing, baseball, and volleyball. During the summer month, there is baseball/softball, golf, swimming, band concerts, and many other activities designed to add to physical and mental illness as well as promote the spirit of the family. **Contact:** Mr. Lawrence Patton, Recreation Commissioner, 6611 Ridge Road, Parma, Ohio 44129.

Wickliffe, Ohio (Population: 16,790) The city's year-round recreation program provides activities and classes to all residents from preschoolers to senior citizens. **Contact:** Mr. Frank L. Fitz, 28730 Ridge Road, Wickliffe, Ohio 44092.

Radnor Township, Pennsylvania (Population: 27,676) The city offers seasonal recreational programs designed to meet the needs of school-aged youth in our community. Activities range from snow skiing to judo. Programs are usually for 8 to 10 weeks with adult supervision. **Contact:** Mr. James Dittmar, Recreation Director, 301 Iven Avenue, Wayne, Pennsylvania 19087.

Reading, Pennsylvania (Population: 78,686) The city's recreation bureau provides an outlet for use of recreation time by running many programs throughout the year. The youth in particular are offered a place to go where there is supervision, where they are welcome, and where they are less likely to get into trouble.

Contact: Mr. Joe Natale, Director, Bureau of Recreation, 3rd and Spruce Streets, Reading, Pennsylvania 19602.

Whitehall Township, Pennsylvania (Population: 23,000) Reference Camp Whitehall. **Contact:** Mr. Tony Cocca, 3219 MacArthur Road, Whitehall, Pennsylvania 18052.

Aiken, South Carolina (Population: 14,978) The city has no real success story except Recreation Department. The Recreation Department received the state award for an innovative program at a recreation center in a minority area of city that provided afternoon learning programs for disadvantaged children after kindergarten and preschool. **Contact:** Mr. Terry Rhinehart, P.O. Box 1177, Aiken, South Carolina 29802.

Greenville, South Carolina (Population: 58,242) The city is providing wholesome and active recreational activities. **Contact:** Mr. Ernest Adams, Recreation Administrator, 103 Cleveland Park Drive, Greenville, South Carolina 29601.

Jacksonville, Texas (Population: 12,264) The summer playground program has been successful in providing a service for children of varied ages. **Contact:** Ms. Dianne Merchant, Activity Center Supervisor, P.O. Box 1390, Jacksonville, Texas 75766.

Arlington, Virginia (Population: 152,599) The Teen Expo is a recreational program in Arlington County's Office for Teens which is very successful. The Teen Expo offers teenagers a sample of new recreational experiences such as white water rafting, horseback riding, and making videotapes. Teenagers throughout this urban county participate, and there is always a waiting list. Financial assistance is available for teenagers needing it to participate in the program. **Contact:** Ms. Carol Hoover, Director, Office for Teens, 3501 2nd Street South, Arlington, Virginia 22204.

Youth Employment

Dothan, Alabama (Population: 48,750) In 1988, the city deferred maintenance until summer and hired an additional 100 summer workers. This is in addition to 150 normally hired in recreation for the summer. **Contact:** Mr. Jim Oates, Director, Leisure Services, P.O. Box 2128, Dothan, Alabama 36302.

Little Rock, Arkansas (Population: 158,195) City Beautiful Kids is a project funded by JTPA. Community support and involvement and business sponsorship of work teams were instrumental in the success of this project, which provides summer jobs for youths 14 to 18 years old. The youth perform clean-up and beautification jobs throughout the city. **Contact:** Ms. Gwen Owens, 500 West Markham, Little Rock, Arkansas 72201.

Euclid, Ohio: (Population: 59,999) City Hall works with the county summer job training program to provide Euclid's economically disadvantaged youth with jobs. The summer jobs provide a source of income and allow youth to gain valuable experience in a working environment. **Contact:** Mr. Kory G. Koran, 21331 Wilmore Avenue, Euclid, Ohio 44123.

Skokie, Illinois (Population: 60,278) The Village has implemented a job-matchup program. This program coordinates various jobs with citizens and then matches up workers whose ages range from 12 years to 18 years. Examples of jobs include: window cleaning, snow shoveling, lawn cutting, raking leaves, etc. **Contact:** Ms. Leslie Gooris, 5127 Oakton Street, Skokie, Illinois 60077.

Des Moines, Iowa (Population: 191,003) The city and the public schools jointly fund the New Horizons Program. The program provides summer jobs for low-income high school students. Jobs include chore services, cleaning vacant lots, and minor home repairs. Enrichment activities are included, and job readiness skills are taught. Work is performed for elderly, low-income, and handicapped residents. **Contact:** Mr. Ron Sallade, 1800 Grand, Des Moines, Iowa 50309.

Kansas City, Kansas (Population: 161,148) Operation Brightside is an initiative started by the mayor to help clean up the city and instill pride in the Kansas City community. Operation Brightside is a citywide

cleanup program that utilizes, among other groups and organizations, city youth from low- to moderate-income families to clean streets and right-of-ways and provide assistance to neighborhood groups with cleanup projects.

The program is successful because it provides jobs for youth, instills a sense of pride in our city and environment, and has spun off to other environmental-type projects in the local schools. **Contact:** Mr. Kirk Sutter, Director, Operation Brightside, Inc., Room 828, 701 N. 7th Street, Kansas City, Kansas 66101.

Wichita, Kansas (Population: 279,835) The city of Wichita's Human Services Department, in a joint venture with the Wichita State University College of Health Professions' Summer Enrichment Program, was selected as a winner of the National 1988 Job Training Partnership Act Awards for Excellence by the National Association of Counties. The Summer Enrichment Program, aimed at at-risk, minority/disadvantaged youth, provides training and education necessary to finish high school and enter health-related professions requiring two to four years of professional/technical instruction. The project is successful because of the unique program design and the joint funding/operation of the program. **Contact:** Mr. Thomas B. Smith, City Hall 2nd Floor, 455 N. Main Street, Wichita, Kansas 67202.

Baltimore, Maryland (Population: 786,741) The Commonwealth Program is a partnership of the mayor, the business community, community groups, and the school system to provide job andcollege guarantees for public school graduates. **Contact:** Patricia Hayes, 250 City Hall, Baltimore, Maryland 21202.

Roseville, Michigan (Population: 54,311) The city provides summer employment for youth including bonuses for attendance and job performance. **Contact:** Mr. Thomas V. Damme, City Manager, City of Roseville, P.O. Box 290, Roseville, Michigan 48066.

Virginia, Minnesota (Population: 11,056) The city provides summer employment to the youth of the community each year. **Contact:** Mr. Nicholas R. Dragisich, City Administrator, City Hall, Virginia, Minnesota 55792.

Buffalo, New York (Population: 357,870) S.M.A.R.T. (Student Manpower and Readiness Training) is a highly cost-effective model for employing hard-to-serve targeted youth within the private sector. The program pays approximately 20 percent of the total training and employment costs. **Contact:** Mr. Grant R. Hansworth, 2300 City Hall, Buffalo, New York 14215.

Mount Vernon, New York (Population: 66,713) Summer Youth Employment is a work experience program sponsored by the Mount Vernon Youth Board. Young people, ages 14-19, may enroll in this seven-week program which is open five hours per day, five days per week. They are paid $3.75 per hour. Participants are assigned to work under supervision in one of the cooperating not-for-profit agencies – hospital, health center, day care center, library – or a municipal department – Department of Public Works, Office of City Clerk, etc. Jobs include an array of clerical assignments, day care teacher's aides, lab assistant, horticulture/landscaping, etc. Remediation one hour a day for each enrollee is a compulsory component. In addition to improving the marketable and academic skills of the participants, the program also results in the augmentation of staff of participating agencies as well as the beautification of selected public sites. **Contact:** Ms. Sue Taylor, Director of Youth Bureau, City Hall, Mount Vernon, New York 10560.

Ogdensburg, New York (Population: 12,375) The Summer Jobs Programs (through the Parks and Recreation Department) provides training and job opportunities. **Contact:** Mr. Doug Loffler, Recreation Director, 330 Ford Street, Ogdensburg, New York 13669.

Alcohol and Drugs

Birmingham, Alabama (Population: 284,413) The city established a Drug Abuse Information Center to provide speakers, referrals, and hot line support. The city also has a "D.A.R.E" (Drug Abuse Resistance Education) Program involving police anti-drug presentations to our city's elementary schools as well as other active prevention programs. **Contact:** Mr. Scotty Colson Administrative Assistant to Mayor City of Birmingham 710 N. 20th Street Birmingham, Alabama 35203.

Vestavia Hills, Alabama (Population: 15,733) Vestavia Hills offers a citywide Drug/Alcohol Awareness Task Force with the school administration, teachers, parents, PTA officers, students, judges, the District Attorney, police administrators, and counselors working together to identify local needs and develop programs to address each need. **Contact:** Mr. Jim Jeffers, c/o Pizitz Middle School 2020 Pizitz Drive Vestavia Hills, Alabama 35216.

Paradise Valley, Arizona (Population: 10,832) The D.A.R.E. Program offers anti-drug presentations to the elementary schools conducted by specially trained police officers. This is a nationwide project in which we participate. It teaches pre-high school students how to say "No" to drugs. **Contact:** Detective Tony George, 6401 E. Lincoln Drive, Paradise Valley, Arizona 85253.

Scottsdale, Arizona (Population: 88,622) The Scottsdale Prevention Institution is a partnership created to provide prevention/intervention programs through the Scottsdale Public Schools. A partnership among the city, the schools, and the hospital avoids duplication of services and creates focus forcommunity substance abuse prevention activities. **Contact:** Mr. Howard Hymes, Room 215, 7428 E. Stetson, Scottsdale, Arizona 85251.

Buena Park, California (Population: 64,165) The police department administers the D.A.R.E. Program in cooperation with local school districts educating children about the dangers of substance abuse. **Contact:** Chief Robert Reber, 6650 Beach Boulevard, Buena Park, California 90620.

El Cajon, California (Population: 73,892) The city participates in a communitywide D.A.R.E. Program with the local school districts. One of our police officers visits schools in the district talking to students about drug and alcohol prevention. The city also participates in "Red Ribbon Week" with the schools. **Contact:** Officer Chuck Merino, 100 Fletcher Parkway, El Cajon, California 92020.

Hayward, California (Population: 93,585) The police department received a grant to introduce the D.A.R.E Programs to the upper elementary grades. **Contact:** Craig Calhoun, Hayward Police Department, 300 W. Winton Avenue, Hayward, California 94547.

Inglewood, California (Population: 94,162) The D.A.R.E. Program, initiated in all 6th grades during the 1987-88 school year, uses three Police Officers full-time to teach a 17-session drug abuse resistance program that is believed to be highly effective in teaching children how to best resist peer pressure and the temptation of drugs. **Contact:** Sgt. Harold Moret, P.O. Box 6500, Inglewood, California 90302.

Mountain View, California (Population: 58,655) The city offers a program on drug awareness and resistance education (D.A.R.E.). **Contact:** Mr. Allen Nelson, Mountain View Police Department, 1000 Villa Street, Mountain View, California 94041.

Oxnard, California (Population: 108,195) The city is currently establishing a committee of government, business, and educational leaders to evaluate the feasibility of implementing a "D.A.R.E." Program (Drug Abuse Resistance Education) in the schools. It is too early to determine results. **Contact:** Mr. Robert Owens, Police Chief, 300 W. Third Street, Oxnard, California 93030.

San Mateo, California (Population: 77,640) Through the efforts of the police department, the city has organized a successful "See Red, Say No" drug awareness and educational program for youth at both the elementary and high school levels. Concentrated attention is focused during a week-long series of events in late October which includes "See Red, Say No" banners throughout San Mateo, pep rallies at the schools, a poster contest, etc. Community funds, along with city resources, have enabled the purchase of curriculum materials for a drug education program. **Contact:** Lt. Ed Smith, 2000 South Delaware, San Mateo, California 94403.

Whittier, California (Population: 68,558) The Youth Services Division of the Human Services Department has participated with other community organizations in implementing the "Quest-Skills for Adolescence" Drug Prevention Program in over three-fourths of the city's elementary schools. A major accomplishment! **Contact:** Mr. Al Mendez, 13230 Penn Street, Whittier, California 90605.

Hammond, Indiana (Population: 93,714) The city offers the D.A.R.E. Program. **Contact:** Chief James Bobowski, Police Department, 5925 Calumet Avenue, Hammond, Indiana 46320.

Portage, Indiana (Population: 27,409) The city has the ADAPT Program which is designed to promote the awareness of drug abuse. **Contact:** Mayor Sammie Maletta, 6070 Central Avenue, Portage, Indiana 46368, 219/762-5425.

Baton Rouge, Louisiana (Population: 219,486) The Family Court Center operates a C.A.P. (Chemical Awareness Program). Supervisory staff conduct screenings and assessments on youth suspected of having a drug problem. Referrals are made to appropriate treatment facilities for treatment as necessary. **Contact:** Carroll DiBenefetto, Family Court Center Director, 8333 Veterans Memorial Boulevard, Baton Rouge, Louisiana 70807.

Boston, Massachusetts (Population: 562,994) Boston Against Drugs (BAD) is a program which promotes more education and awareness of the consequences of drug abuse and the benefits of being drug free. BAD is a highly successful partnership of city government, the police department, schools, neighborhoods, and businesses designed to compiement existing prevention efforts by linking businesses to Boston neighborhoods. The overall aim of BAD is to change existing attitudes so that drug use among preteens and teens is not the norm. **Contact:** Mr. Howard Hughes, Community Schools, 26 West Street, Boston, Massachusetts 02111.

Bridgewater, Massachusetts (Population: 17,202) There is a "Say No to Drugs" Program annually sponsored by the Parents, Children and Teachers of the McElwain School. The program successfully involves elementary school-age children in a fairly intensive educational program about the harmful effects of drugs. **Contact:** Mr. Donald DeLutes, Principal, McElwain School, Bridgewater, Massachusetts 02324.

Lynn, Massachusetts (Population: 78,471) The Drug Advisory Commission operates out of Mayor's office of Community Resources. It is very involved in substance abuse prevention programs and sponsors teacher training workshops to prevent substance abuse. **Contact:** Ms. Gen Ritz, Office of Community Resources, Lynn City Hall, Lynn, Massachusetts 01901.

Melrose, Massachusetts (Population: 30,055) Melrose has a substance abuse prevention program involving teachers, principals, parents, and peer groups which tries to improve self-image by classifying all and any student as a possible drug abuser to reach the group as a whole. **Contact:** Mr. Bruce MacPherson, Melrose High School, 360 Lynn Fells Parkway, Melrose, Massachusetts 02176.

Pontiac, Michigan (Population: 76,715) The police department provides a prevention program to second and fifth graders in the school district and attempts to educate and discuss substance abuse and methods for prevention at an early age. Police in uniform go into classrooms and directly relate with the youth. Many positive comments have been received from all parties concerned. **Contact:** Officer Jim Ferrins, 450 Wide Track, Pontiac, Michigan 48058.

West Seneca, New York (Population: 51,210) The Juvenile Bureau has substance abuse prevention programs in 5th and 7th grades. It also has programs on many juvenile problems in almost all grade levels from K-12. Last year, the Bureau presented programs to 6,660 students. The Bureau has received thousands of letters from children, parents, and teachers praising the programs. The programs involve the police in the community and depict the police officer as someone who is there to aid children. The Bureau also operates a Youth Court that is an alternative to Family court. This court is run strictly by teenagers from 13 to 19 who judge, defend, and prosecute their peers. **Contact:** Lt. Allen F. Scioli, West Seneca Police Juvenile, 1250 Union Road, West Seneca, New York 14218.

Castle Shannon, Pennsylvania (Population: 10,164) The mayor has instituted a drug and alcohol abuse awareness program. It involves educating kindergarten through high school students as well as parents of those students. The business community has been asked to support a series of educational programs on

this subject. **Contact:** The Honorable Thomas P. O'Malley, Mayor, Borough of Castle Shannon, 3800 Willow AvenueCastle Shannon, Pennsylvania 15234.

Bedford, Texas (Population: 20,821) The city implemented the D.A.R.E. Program. It has dedicated three police officers to go into schools to meet with the students. **Contact:** Asst. Chief Mike Murphy, Bedford Police Department, Box 157, Bedford, Texas 76095.

Newport News, Virginia (Population: 144,903) The Mayor's Committee on Substance Abuse provides a forum for a private/public cross-section of community leaders to address substance abuse and make recommendations for its prevention in the city. **Contact:** The Honorable Jessie M. Rattley, Mayor of the City of Newport News, 2400 Washington Avenue, Newport News, Virginia 23607.

Mercer Island, Washington (Population: 21,522) The city administers a drug prevention program that promotes action by a variety of civic groups, provides programming and family life skills classes based on researched risk factors, and uses a wide variety of public relations methods to teach prevention concepts. **Contact:** Ms. Nan Henderson, P.O. Box 1440, Mercer Island, Washington 98040.

Mountlake Terrace, Washington (Population: 16,534) The Domestic Complaint Aide helps families cope with and assists inovercoming adolescent alcohol and drug abuse. **Contact:** Ms. Vickie Keith, Civic Center, Mountlake Terrace, Washington 98043.

Child Welfare

Lynchburg, Virginia (Population: 66,743) The Community Coordination Network (CNN) is a web of human service agencies, public and private professionals, and parent/child advocates who mutually organize their time and resources in an attempt to provide more effective and efficient services to high-risk youth and their families. The CNN underscores the importance of children remaining in their own community, using the least restrictive alternatives, family treatment, and home-based services. **Contact:** Ms. Paula Ryan, P.O. Box 2497, Lynchburg, Virginia 24501.

Virginia Beach, Virginia (Population: 262,199) The city's therapeutic team approach to providing foster care services to families is a model which has been used for the last three years and has been successful in facilitating the reuniting of over half of the families served by the two teams each year that it has been operational. The model has also allowed the agency to achieve and maintain federal and state compliance of the many policy mandates governing the program. This model is successful because responsibilities for accomplishing tasks are shared between team members.

A treatment team consists of a supervisor, team leader, family therapist, child welfare specialist, social worker, and volunteers and social work students. A family systems approach is used in service delivery. The efforts of the entire team result in a tentative treatment that has benefited the families served and the agency. **Contact:** Ms. Frances C. Elrod, Virginia Beach Department of Social Services, 3432 Virginia Beach Boulevard, Virginia Beach, Virginia 23452.

Family Support

Glendale, Arizona (Population: 96,988) The Human Services Youth Services Program provides free confidential counseling for families, youth, and children. The purpose of the program is to provide early intervention with problems in order to prevent juvenile delinquency. These services are free of charge to city residents. **Contact:** Ms. Rita Koppinger, 5850 W. Glendale Avenue, Glendale, Arizona 85301.

Bellflower, California (Population: 53,411) The city has an excellent Social Service Referral System. **Contact:** Ms. Marlene Tomlin, 16600 Civic Center Drive, Bellflower, California 90706.

Claremont, California (Population: 31,028) The city has a counseling program run cooperatively by the school district, Family Services, and the city. It is funded by general fund monies and is administered by the city. The counseling is provided by Family Services, and it is done at our high schools, intermediate

school, and two elementary schools. Both individual and group counseling are available year-round to students. There is a system for including families if necessary. **Contact:** Mr. Don Chadwick, 840 N. Indian Hill Boulevard, Claremont, California 91711.

Fullerton, California (Population: 102,246) The city contracts with the Western Youth Services to provide family counseling by caseload upon referrals from schools, the city, and the police department. **Contact:** Mr. Donald Baumeister, Executive Director, Western Youth Services, 204 E. Ameriga Avenue, Fullerton, California 92637.

Garden Grove, California (Population: 123,351) The city developed and administered a social support and counseling center for the community. The center included a substance abuse program, child abuse program, and a teenage runaway facility. The city formed a nonprofit organization to take over the programs which reduced the city's financial role and provided more flexibility to the programs. **Contact:** Ms. Dana Obanesian Administrative Analyst 11391 Acacia Parkway Garden Grove, California 96240.

Huntington Beach, California (Population: 170,505) The city operates a "Project Self-Sufficiency" for single-parent families. The program assists in job training, housing assistance, assistance in child care, etc. **Contact:** Ms. Carol Runzel, 2000 Main Street, Huntington Beach, California 92648.

Irvine, California (Population: 62,134) The For Families Program provides support and information to help families build their own resources to handle problems effectively. The program emphasizes prevention strategies to facilitate effective problem-solving approaches to family crises. **Contact:** Ms. Stephanie Broderick, 2815 McGaw, Irvine, California 92713.

Mount Prospect, Illinois (Population: 52,634) The Human Services Division provides short-term counseling for residents in need. The Human Services Division employs three staff members with master's degrees in social services. The police department collaborates with the Forest Hospital on a social services program which provides longer-term counseling. Staff are Ph.D. candidates. The Human Services Division has a full range of services for adult residents which ultimately helps the children. **Contact:** Police Department, Social Services Program, 112 East Northeast Highway, Mount Prospect, Illinois 60056.

Rock Island, Illinois (Population: 46,821) The Youth Service Bureau of Rock Island County is funded in part by the City of Rock Island. Counseling for troubled youth and their parents is conducted at an office maintained in Rock Island. The school system, police department, and others are actively involved in this program. **Contact:** Mr. Thomas Bruckmann, Director, Youth Service Bureau, Suite 5, 4300 12th Avenue, Moline, Illinois 61265.

Oak Lawn, Illinois (Population: 60,590) The Oak Lawn Operation Snowball is a chapter of a statewide positive peer leadership program for high school age youth. We have weekly Monday night meetings as support and planning for a yearly three-day retreat and to plan and implement Operation Snowflake, a one-day event for junior high school youth. **Contact:** Ms. Nancy DeLap 9403 S. 53rd Court Oak Lawn, Illinois 60453.

Tinley Park, Illinois (Population: 26,178) The township sponsors a youth counseling program. **Contact:** Mayor Edward J. Zabrocki, 16250 S. Oak Park, Tinley Park, Illinois 60477.

Portland, Maine (Population: 61,572) "Project Self-Sufficiency" provides education, training, and jobs to single-parent families. Successful participation in the program ensures a subsidized housing certificate. **Contact:** Ms. Barbara Winkler, 196 Lancaster Street, Portland, Maine 04101.

Greenbelt, Maryland (Population: 16,000) This city has a long-standing history of giving financial and philosophical support to a Youth Services Bureau, which is housed in the municipal office building. The Bureau helps families with behaviorally focused family counseling, tutoring, a GED class, and vocational assistance. Volunteers augment a small staff with delivery of services. Success rates have been derived by ratings made by an independent reviewer of followup questionnaires mailed to all terminated client families. We believe we increase likelihood of success as we gain family participation in defining problems,

goals, and steps needed to reach goals. **Contact:** Ms. Carol Leventhal 25 Crescent Road Greenbelt, Maryland 20770.

Bloomington, Minnesota (Population: 81,831) The Storefront/Youth Action Agency is a counseling agency working with the problems of youth and their families. The goal of the agency is to keep young people in school and out of the courts and in a family relationship. The agency is funded by a variety of sources, including the cities, school districts, and community education departments of Richfield, Bloomington and Edina, Hennepin County Community Services, the United Way of Minneapolis, the Justice Grant Program, State of Minnesota, and contributions from foundations, corporations, churches, services clubs, and individuals. **Contact:** Ms. Mary Ellen Harris 5701 Normandale Road Edina, Minnesota 55424.

Dover Township, New Jersey (Population: 64,455) Dover Township Youth Services offers counseling to youngsters between the ages of 7-17 and their families. This agency also has a drop-in center where youths may come to socialize with their peers. The township provides transportation to those youngsters who are unable to get to the youth center on their own. All services provided are free of charge. **Contact:** Ms. Zena Glasgow, Director, Youth Services, 1505 Bay Avenue, Toms River, New Jersey 08753.

Cleveland Heights, Ohio (Population: 56,438) The Youth Services Mentoring Program of the Planning Department links successful adult role models with teenagers to support educational efforts and career choice and motivation. **Contact:** Mr. Chuck Schuller, 40 Severance Circle, Cleveland Heights, Ohio 44118.

San Juan, Puerto Rico (Population: 432,973) The Department of Family Services administers several programs that provide counseling and information services which provide support in terms of direct services to families and children. Among these are the Head Start Program and several projects under the Family and Community Development Area which focus on the particular topic of family support. **Contact:** Mrs. Maritza Arroyo de Garay, Call Box 70179, Hato Rey, Puerto Rico 00936.

Richmond, Virginia (Population: 219,214) The Department of Social Services employs five family therapists and a supervisor. This staff works with families who have a history of neglect or child abuse. The incidence of family breakdown, requiring the foster care placement of children from the families who have participated, is extremely low. **Contact:** Mr. Ray Cooper, 900 East Marshall Street, Richmond, Virginia 23219.

Education

Phoenix, Arizona (Population: 764,911) The Win Win program follows two classrooms of children in a disadvantaged area with in-depth counseling, tutoring, and stay-in-school advice. The program is only two years old, but the children's performance is already showing improvement. **Contact:** Ms. Rose Newsome, Director, Equal Employment Opportunity, 550 West Washington, Phoenix, Arizona 85009.

Carson, California (Population: 81,221) The city offers the Tiny/Tots early childhood education classes to the residents of Carson. The curriculum is designed to promote school readiness skills and social interaction. This program is limited to children three to five years olds. **Contact:** Mr. Joe Wolfson, Community Center Manager, 801 E. Carson Street, Carson, California 90745.

Oakland, California (Population: 339,288) The Head Start Program is the city's most successful program for children. It provides quality early childhood education for low-income children. It has been successful for many reasons, including excellent staff, parental involvement, and community support. **Contact:** Ms. Ethel Houze, Commission Staff Assistant, Office of Parks and Recreation, 1520 Lakeside Drive, Oakland, California 94612.

Hialeah, Florida (Population: 145,254) Project P.R.A.I.S.E. (Positive Role Models Achieve Improved Student Effort) is a program which uses community role models for older students at risk (for example, junior and senior high school students). Also, the senior high school students (achievers) are used as role

models for the elementary school students at risk. In 1988, the city received the Outstanding Partner Award from the county school system for work in dropout prevention and other programs. In addition to the partner program, the city has a representative on the Superintendent's Council as well as the community representative for 26 public schools involving more than 20,000 people.

The Dade Partners is a partnership program involving the business district, the government, and community friends which has produced outstanding progress in the Dade County Public Schools. Dade Partners Exemplary Awards are given in recognition of outstanding achievements by organizations and individuals working as partners with the school system. **Contact:** Mr. Daniel F. DeLoach, 501 Palm Avenue, Hialeah, Florida 33010.

Savannah, Georgia (Population: 141,654) The city was very instrumental in developing a plan that was funded in 1988 by the Annie E. Casey Foundation to address the problems of at-risk students in the public school system. The City Manager spearheaded the effort and now serves on the project oversight collaboration committee. The New Future Initiatives is a five-year project to address the problems of low academic achievement, dropouts, teen pregnancy, and teen unemployment. **Contact:** Mr. Otis S. Johnson, 128 Habersham Street, Savannah, Georgia 31401.

Aurora, Illinois (Population: 81,293) The Link Program is a joint program by the city and community college (Wanborsee) whereby youth can attend summer school and get paid for successfully completing the program. The program is directed to at-risk kids. Math and reading scores were improved during the summer program. **Contact:** Mr. Fred Rodgers, Youth and Sports Director, 44 E. Downer Place, Aurora, Illinois 60507.

South Bend, Indiana (Population: 109,727) The city is working very close with the school district and the police department. Recognition is made for outstanding things done by children by sending out letters from the mayor or having the children come to the mayor's office. **Contact:** Mr. E. Jack Reed, Assistant to the Mayor, 14th Floor, County-City Building, South Bend, Indiana 46601.

Brockton, Massachusetts (Population: 95,172) Brockton's Dropout Prevention Program has proven to be very successful in providing both a flexible yet strongly supportive environment for children at risk in the city. This program, initiated through the school system, has depended on state/federal funds to continue. It is also backed up by a strong communitywide advisory council. **Contact:** Mr. Chuck Minicello, Dropout Prevention Coordinator, Lincoln School/BHS, 70 Highland Street, Brockton, Massachusetts 02401.

Everett, Massachusetts (Population: 37,195) The city developed an early childhood education program. The planning, fundraising, and outreach efforts were the result of a coordinated effort initiated by the city and included municipal departments, private agencies, and corporations. **Contact:** Ms. Gail Bloom, City Hall, Room 2, Everett, Massachusetts 02149.

Oak Park, Michigan (Population: 31,537) The city has a preschool which meets for 2 1/2-hour sessions – morning and afternoon – five days a week. Youngsters attend anywhere from one to three sessions in a week at the community center. This prepares the child for kindergarten and enables interaction with other children. **Contact:** Mr. Steven Woodberg, 14300 Oak Park Boulevard, Oak Park, Michigan 48237.

Nashville, Tennessee (Population: 455,651) The Summer Enrichment Program was created on a shoestring budget. During the summer of 1988, the program served 200 low-income children ages 4 to 12 and provided a variety of activities designed to supplement the 9-month curriculum. **Contact:** Mr. Walter L. Hunt, 1624 5th Avenue, North, Nashville, Tennessee 37208.

Seattle, Washington (Population: 493,846) The city has developed and funds a program to put family support workers in ten elementary schools. These are resource people who work directly with children in schools who need help with health, food and clothing as well as other needs. This frees the teacher to teach. **Contact:** Ms. Dianna Finnerty, Office of Management and Budget, Seattle, Washington 98104.

Ashwaubenon, Wisconsin (Population: 14,486) A Co-op Nursery School has been operating for the past five years in one room of the Village Office Complex, which is a remodeled grade-school building. **Contact:** Mr. Tony Frigo, 2280 S. Broadway, Green Bay, Wisconsin 54304.

Coordination, Collaboration, and Other

Mobile, Alabama (Population: 200,452) Youth Concerns Committee, 1988. Mayor Arthur Outlaw serves on a 20-member blue-ribbon committee of community leaders to develop a coordinated community plan for addressing the youth concerns of child abuse, youth substance abuse, teen pregnancy, and school dropouts. The community plan was formally announced on August 25, 1988. **Contact:** Mr. Dan A. Williams, Planning Director, Mobile Area United Way, P.O. Drawer 89, Mobile, Alabama 36601.

Oakland, California (Population: 339,288) The Youth Advisory Commission is an 11-member commission composed of youth and advisory adult members responsible for advising the City Council on all policy issues affecting youth. **Contact:** Ms. Ethel Houze, Commission Staff Assistant, Office of Parks and Recreation, 1520 Lakeside Drive, Oakland, California 94612.

Rockford, Illinois (Population: 139,712) The mayor has served as a convener for several task groups to identify and recommend solutions for various topic areas. He utilized all relevant city departments to work with the task forces. City funds from the Human Services and Community Development Departments have been used to address the problems. The city has received numerous awards for our efforts. **Contact:** Ms. Gwen L. Robinson, Executive Director, 1005 So. Court, Rockford, Illinois 61102.

South Bend, Indiana (Population: 109,727) The city is working very closely with the school district and the police department. Recognition is made for outstanding things done by children by sending out letters from the mayor or having the children come to the mayor's office. **Contact:** Mr. E. Jack Reed, Assistant to the Mayor, 14th Floor, County-City Building, South Bend, Indiana 46601.

Council Bluffs, Iowa (Population: 56,449) The police department has opened an information office in the Centre Point Mall where it is putting out information on its outreach programs. **Contact:** Mr. Patrick J. Hall, 227 South 6th Street, Council Bluffs, Iowa 51501.

Stoneham, Massachusetts (Population: 21,424) The city offers a community-based strategic planning effort to analyze social issues and plans to address them over time. **Contact:** Mr. Peter D'Angelo, Chairman, 149 Franklin Street, Stoneham, Massachusetts 02180.

Caguas, Puerto Rico (Population: 118,020) The Municipal Assembly of Caguas decided to give independent status to the Department of Services to the Family in 1982 by a local ordinance. In this way, the department would coordinate other existing programs, including Head Start, Programs for the Elderly and Handicapped, and other family-oriented services. **Contact:** Ms. Carmen Villarini, P.O. Box 907, Caguas, Puerto Rico 00626.

Fort Worth, Texas (Population: 385,141) The Tarrant County Youth Collaboration, a consortium of over 60 youth-related social service organizations in the county area, provides networking and support services as well as a forum for discussion and action on a host of issues related to youth in the community, one of which is substance abuse. **Contact:** Mr. Ramon Guajardo, Assistant City Manager, 1000 Throckmorton, Fort Worth, Texas 76102 **or:** Tarrant County Youth Collaboration, 7401 W. Rosedale, Fort Worth, Texas 76107.

Roanoke, Virginia (Population: 100,427) The "Self-Sufficiency Project" concentrates on family needs, job placement, day care, and strengthening parenting skills. **Contact:** Mrs. Corinne Gott, Superintendent of Social Services, 215 Church Avenue S.W., Room 355, Roanoke, Virginia 24011 **or:** Mrs. Marion V. Crenshaw, Youth Planner, 215 Church Avenue S.W., Room 355, Roanoke, Virginia 24011.

ADDENDUM

Tucson, Arizona (Population: 330,537) Tucson is developing a model for planning for children's mental health that uses a collaborative approach involving the city, county, and state and all service providers – business, civic organizations, churches, etc. **Contact:** Ms. Carol Zimmerman, Mayor's Office, Box 27210, Tucson, Arizona 85726-7210.

Monterey Park, California (Population: 54,338) While not quite a success story yet, the city has recently convened a Child Care Task Force in order to explore community needs and recommend solutions and/or new programs. **Contact:** Mr. Larry Reihm, 320 W. Newmark Avenue, Monterey Park, California 91754.

Santa Barbara, California (Population: 74,542) There is a Santa Barbara County Children's Commission. **Contact:** Charlene Chase, Director, Department of Social Services, Santa Barbara County Children's Commission, 117 East Carrillo Street, Santa Barbara, California 93101.

Thousand Oaks, California (Population: 77,797) The city of Thousand Oaks gives funding and shares resources in support of a large number of community services beneficial to children including recreation and parks (a separate district) and the school district (a separate agency) as well as ones mentioned. The city is in the process of building a Teen Center which will provide a variety of recreational and social services. The city is a member of a community child care task force. **Contact:** Ms. Denese W. Cox, Human Resources Office, City of Thousand Oaks, 2150 W. Hillcrest, Thousand Oaks, California 91320.

Boca Raton, Florida (Population: 49,447) The Parks and Recreation Department jointly sponsors summer day camp and after school care programs with the county school system. These programs provide enrichment activities as well as recreation. A newly initiated program provides activities for children with special needs. **Contact:** Mr. Thomas Alexander, 201 W. Palmetto Park, Boca Baton, Florida 33432.

Gainesville, Florida (Population: 81,371) The CCEP program is for children 4-11. Contact: Dr. Lem Moore, Post Office Box 490, Gainesville, Florida 32602.

Oak Park, Illinois (Population: 54,887) The Oak Park Health Department provides a quarterly newsletter for 32 child care programs. **Contact:** Ms. Nancy Haggerty, 1 Village Hall Plaza, Oak Park, Illinois 60302.

Lexington, Kentucky (Population: 204,165) The Early Child Care Center/Family Care Center (Lexington-Fayette Government Division of Children's Services) provides parent education and developmental day care for multiproblem families referred by the Cabinet for Human Resources. The 55 children currently served are at risk of developmental delay due to dysfunctional families, child abuse, and neglect. The children receive therapeutic services and preventive health care through contractual arrangements with Graham B. Dimmick Child Guidance Service (Comprehensive Care Center), Cardinal Hill Hospital, and the University of Kentucky Colleges of Dentistry, Medicine, and Nursing.

The program encourages parent participation in a weekly parent support group. The program promotes self-sufficiency by referring parents for education and job training when appropriate. The center staff frequently assist families with transportation, clothing, medical, and hygiene needs related to the care of their children.

The Early Child Care Center currently serves children ages two to six in the center. Siblings under two are served in a Child Guidance Service parent-infant intervention project and through home visits.

In July 1989, the Early Child Care Center will become integrated into the Family Care Center. The new program will be housed in a building funded by the Urban County Government. This 48,000 square foot facility is under construction on an adjoining site. The new program will serve 200 infants and preschool children and approximately 80 families. Priority for service will be given to young parents who have not completed a GED or high school diploma. Program components will include: case management, adult basic education, parenting skills, job training, employment readiness counseling, on-site and off-site work experience, a child health clinic, and developmental child care.

The Program Director identified lack of transportation for parents to education and work sites and lack

of subsidized child care as barriers to self-sufficiency in the current program. The program presently does not assist parents when their protective service status ends. **Contact:** Barbara Curry, 200 East Main Street, Lexington, Kentucky 40508.

Owensboro, Kentucky (Population: 51,000) The Housing Authority of Owensboro, with the assistance of a local church and a federal grant, is planning a subsidized child care center in our largest public housing project.

The Commission on Children in Need was instrumental in the reestablishment of the school nurse program in our public schools. This was made possible through the resources of a local private hospital. **Contact:** Ms. Patti Rayburn, 2161 E. 19th Street, Owensboro, Kentucky 42301.

Barnstable, Massachusetts (Population: 30,898) A Teen Center was created by a renovating a town building with all volunteer labor and donated materials. The Center provides dancing, movies, a snack bar, video games, pool, and a drug-free environment. Volunteers acted as general contractors and opened and staff the center. The building was renovated in five weeks! **Contact:** Ms. Deborah J. Hill, P.O. Box 955, Barnstable, Massachusetts 02601.

Albert Lea, Minnesota (Population: 19,190) We have an elementary school level program taught by volunteers and based on improving self-esteem. **Contact:** Mrs. Sandy Petersen, Director, Project Charlie, Albert Lea Public School District #241, 211 W. Richway Drive, Albert Lea, Minnesota 56007.

Columbia, Missouri (Population: 62,061) The City funds 35 to 40 infant and preschool day care slots for clients who would otherwise be on the State Division of Family Services waiting list. Eligibility for service is determined by the Department of Family Services (DFS), based on income criteria and other conditions. When the DFS caseload is at its maximum, city residents are placed on the city's day care program. Parents select the center of their choice from 13 centers holding vendor contracts with the city. This is a public-public partnership between the city and County DFS. **Contact:** Ms. Lila Dwell, Coordinator, Office of Community Services, P.O. Box N, Columbia, Missouri 65203.

Kansas City, Missouri (Population: 448,028) A recent federal grant is providing case management assistance for homeless parents and licensed child care for their children. **Contact:** Ms. Mary K. Vaughn, Director, Urban Community Services Department, 414 East 12th, Kansas City, Missouri 64106.

Lincoln, Nebraska (Population: 171,932) City-county personnel are now offered a cafeteria benefit plan including child care subsidies (tax shelter income), and we have hired a technical assistant to work with the corporate sector. The Lincoln-Lancaster (County) Child Abuse Prevention Council is staffed by a city-county employee. **Contact:** Ms. Kit Boesch, Human Services Administrator, 555 South 10th, Lincoln, Nebraska 68508.

Newark, New Jersey (Population: 329,248) Public health services are provided on-site at Title XX day care centers. Compliance rates have improved, epidemic risk has been reduced, and parents do not have to lose time from work. **Contact:** Mr. Claude Wallace, 110 William Street, Newark, New Jersey 07104.

Olean, New York (Population: 18,000) Programs on substance abuse and delinquency prevention have been initiated in all the city's schools by the Youth Bureau and Police Department. **Contact:** Cas Konieczka, Executive Director, Youth Bureau, Olean Municipal Building, Olean, New York 14760.

Delaware, Ohio (Population: 20,000) The City of Delaware Police Department developed one of the first domestic violence programs in the State of Ohio in 1979 (law established in Ohio in 1979). The program became a model and was then used in many communities throughout the state. Captain William Smith was the only police officer selected to serve on the Governor's Task Force for Family Violence as a result of this program. **Contact:** Captain William Smith, 15 South Sandusky Street, Delaware, Ohio 43015.

Philadelphia, Pennsylvania (Population: 1,688,210) Project SAFE is a 24-hour-a-day, 7-day-a-week program designed to provide intensive services to families. The project is modeled after the Homebuilder's

Project in Washington, D.C. **Contact:** Ms. Bonnie Queen, Supervisor, 1401 Arch Street, Philadelphia, Pennsylvania 19102.

Pittsburgh, Pennsylvania (Population: 423,959) The Mayor's Commission on Families was established to respond to the high incidence of black infant mortality and to teen pregnancy-related issues. **Contact:** Ms. Huberta Jackson-Lowman, 200 Ross Street, Pittsburgh, Pennsylvania 15219.

Austin, Texas (Population: 345,890) In March 1985, the Mayor's Task Force on Child Care was appointed to identify the needs of children, parents, child care providers, and employers, as well as the economic issues involved in providing quality child care. The Task Force was also charged with developing a shortand long-range plan for a child care system to meet these needs. In October 1985, the Task Force submitted its report and recommendations to the Mayor and City Council. The Task Force recommended a commission for child care be established to implement its recommendations. The Child Care Commission was established by the City Council in October 1985 and began its work in June of 1986. The Commission is composed of 20 persons appointed by the City Council. Each member may serve a term of two years. The Child Care Commission recommends to the City Council plans for the creation, development, and implementation of programs for affordable, quality child care and, upon Council's direction, acts to execute or facilitate such program activities. In January 1988, after extensive research on similar positions throughout the nation's cities, the Child Care Commission recommended that the City Council authorize the City Manager to hire a full-time Child Care Coordinator to coordinate child care issues, address the impact of proposed policy on child care, and assist the Child Care Commission with long-range planning. The Child Care Coordinator will begin her work on December 19, 1988. **Contact:** Ms. Kathi Rye, Research Specialist HCSD, 2209 Rosewood Avenue, Austin, Texas 78702.

Grand Prairie, Texas (Population: 71,462) The city council approved the use of block grant funds for child care assistance. This helps needy parents with child care and enables them to work and to have child care, i.e., reduce latchkey children. **Contact**: Ms. Elizabeth Trani, Assistant to the Mayor, P.O. Box 530011, Grand Prairie, Texas 75053-0011.

Notes

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2. Ruth Sidel, *Women and Children Last: The Plight of Poor Women in Affluent America*, New York: Viking Penguin, 1986, p. 129.
3. Children's Defense Fund, *A Children's Defense Budget FY 1989*, Washington, D.C.: The Children's Defense Fund, 1988, p. 180.
4. "Child Care: The Bottom Line," *Children Today*, 16, #4 (July-August, 1987), p. 3.
5. Ibid.
6. Alfred Kadushin and Judith Martin, *Child Welfare Services* (4th ed.), New York: Macmillan, 1988, p. 209.
7. Children's Defense Fund, op. cit., p. 180.
8. Anne W. Nichols and Rebecca Schilit, "Telephone Support for Latchkey Children," *Child Welfare*, LXVII #1 (January-February, 1988) p. 49.
9. Ellen Gray and Peter Coolsen, "How Do Kids Really Feel About Being Home Alone?" *Children Today*, 16, #4 (July-August, 1987), p. 31.
10. Children's Defense Fund, op. cit., p. 178.
11. Coryl Jones and Catherine Bell-Bolek, "Kids and Drugs: Why, When and What We Can Do About It," *Children Today*, 15, #3 (May-June, 1986), p. 6.
12. Mark Fraser, "Family, School and Peer Correlates to Adolescent Drug Abuse," *Social Service Review*, 58, #3 (September, 1984), pp. 438-9.
13. J. David Hawkins, et. al., "Delinquency and Drug Abuse: Implications for Social Services," *Social Service Review*, 62, #2 (June, 1988), p. 258.
14. Mark Fraser and Nance Kohlert, "Substance Abuse and Public Policy," *Social Service Review*, 62, #1 (March, 1988), p. 103.
15. Mayor William H. Hudnut, III, Indianapolis, January 12, 1988.

16. Sandra Helmick and Judith Zimmerman, "Trends in the Distribution of Children Among Households and Families," *Child Welfare*, LXIII, #5 (September-October, 1984), p. 403.

17. Sheila Akabas, "Workers are Parents, Too," *Child Welfare*, LXIII, #5 (September-October, 1984), p. 387.

18. Frederic Reamer, "The Affordable Housing Crisis and Social Work," *Social Work*, 34, #1 (January, 1989), p. 5.

19. Jonathan Kozol, "A Reporter at Large: The Homeless and Their Children-I," *The New Yorker*, January 25, 1988, p. 72.

20. Michael Harrington, *Who are the Poor?* Washington, D.C.: Justice for All, 1987, p. 13.

21. Harrington, op. cit., p. 13.

22. Harrington, op. cit., p. 5.

23. Children's Defense Fund, op. cit., p. xiii.

24. Tom Joe and Cheryl Rogers, *By the Few For the Few*, Lexington: D.C. Heath, 1986, p. 13.

25. Irwin Garfinkel, "The Evolution of Child Support Policy," *Focus*, 11, #1 (Spring, 1989), p. 11.

26. Robert D. Green and Patricia D. Crooks, "Family Member Adjustment and Family Dynamics in Establishing Single Parent and Two Parent Families," *Social Service Review*, 62, #4 (December, 1988), p. 600.

27. Larry Bumpass, "Children and Marital Disruptions: A Replication and Update," *Demography*, 21 (February, 1984), pp. 71-82.

28. Daniel P. Moynihan, "Our Poorest Citizens: Children," *Focus*, 11, #1, (Spring, 1988), p. 5.

29. Cathleen Jordan, Norman Cobb, and Rex McCully, "Clinical Issues of the Dual-Career Couple," *Social Work*, 34, #1 (January, 1989), p. 30.

30. Mayor Don Fraser, Minneapolis, quoted in *Children, Families, and Cities: Programs that Work at the Local Level, John E. Kyle (ed.), Washington, D.C.: National League of Cities, 1987, p. 5.*

31. Center for the Study of Social Policy, *The Annie E. Casey Foundation's New Futures Initiative: Strategic Planning Guide*, quoted in *Children, Families, and Cities: Programs that Work at the Local Level*, John E. Kyle (ed.), Washington, D.C.: National League of Cities, 1987, p 8.

32. Laura DeKovan Waxman, *A Status Report on Children in America's Cities*, Washington, D.C.: The U.S. Conference of Mayors, October, 1988, p. 5.

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About the Author

Catherine E. Born is a faculty member at the University of Maryland School of Social Work in Baltimore. A social worker by profession and a city resident by preference, she teaches in the areas of social policy, research and institutional racism. Her area of greatest interest and commitment, in research, writing and advocacy, is public welfare, particularly point-in-time and longitudinal studies of AFDC clients and the enforcement of child support.

About the NLC Children and Families In Cities Project

NLC's **Children and Families in Cities Project** is an ongoing effort to encourage and assist local elected officials in meeting the needs of children and families.

The project, through a survey of many cities, is "mapping" city hall interests, involvement, and needs concerning issues affecting children and families, especially those living in poverty. The analysis of this survey is reported in *Our Future And Our Only Hope*. The information obtained will permit NLC to develop assistance tailored to the needs of city hall officials. Other project activities include specialized workshops, publications, including the booklet *Your City's Kids*, a useful guide to how local officials can think about and plan for children and families, and a forthcoming handbook on evaluating local programs serving children and families. Funding for these activities is being provided by grants from Carnegie Corporation of New York, the Lilly Endowment, and the Rockefeller Foundation.

In 1987, as part of the project's planning phase, NLC published *Children, Families & Cities: Programs that Work at the Local Level*, a casebook of thirty-two model programs that can be adapted by other cities and towns, complete with contact information for each program and references to other organizations that offer advice and publications. Topics covered include strategic planning, youth employment, child care, teen pregnancy prevention, and child and family homelessness. Funding for this publication was provided by a grant from the Foundation for Child Development.

For information about project activities, contact:

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About The National League of Cities

The National League of Cities was established in 1924 by and for reform-minded state municipal leagues. It now represents 49 leagues and more than 1,400 cities directly and, through the membership of the state municipal leagues, more than 16,000 cities indirectly.

NLC serves as an advocate for its members in Washington in the legislative, administrative, and judicial processes that affect them; develops and pursues a national urban policy that meets the present and future needs of our nation's cities and the people who live in them; offers training, technical assistance and information to municipal officials to help them improve the quality of local government in our urban nation; and undertakes research and analysis on topics and issues of importance to the nation's cities.